Fill in	this information to identify your case:		
Debto	• •		
	First Name Middle Name Last Name		
Debto	/ Illiana mananan		
(Spouse	if, filing) First Name Middle Name Last Name		
United	States Bankruptcy Court for the: EASTERN DISTRICT OF MICHIGAN		
	number 19-40519		
(if know	n)	_	if this is an
		amend	ed filing
	nation. Fill out all of your schedules first; then complete the information on this form. If you are filing ameriginal forms, you must fill out a new <i>Summary</i> and check the box at the top of this page. Summarize Your Assets	nded schedule	s after you file
		Your as Value of	sets what you own
	Schedule A/B: Property (Official Form 106A/B) a. Copy line 55, Total real estate, from Schedule A/B	. \$	0.00
1	b. Copy line 62, Total personal property, from Schedule A/B	. \$	19,829.77
1	c. Copy line 63, Total of all property on Schedule A/B	\$	19,829.77
Part 2	Summarize Your Liabilities		
		Your lia Amount	bilities you owe
	Schedule D: Creditors Who Have Claims Secured by Property (Official Form 106D) 2a. Copy the total you listed in Column A, Amount of claim, at the bottom of the last page of Part 1 of Schedule D.	\$	0.00

Your total liabilities \$ 59,822.4

Part 3: Summarize Your Income and Expenses

Part 4: Answer These Questions for Administrative and Statistical Records

Schedule E/F: Creditors Who Have Unsecured Claims (Official Form 106E/F)

- 6. Are you filing for bankruptcy under Chapters 7, 11, or 13?
 - No. You have nothing to report on this part of the form. Check this box and submit this form to the court with your other schedules.
 - Yes
- 7. What kind of debt do you have?
 - Your debts are primarily consumer debts. Consumer debts are those "incurred by an individual primarily for a personal, family, or household purpose." 11 U.S.C. § 101(8). Fill out lines 8-9g for statistical purposes. 28 U.S.C. § 159.
 - Your debts are not primarily consumer debts. You have nothing to report on this part of the form. Check this box and submit this form to the court with your other schedules.

Official Form 106Sum

Summary of Your Assets and Liabilities and Certain Statistical Information

page 1 of 2

Best Case Bankruptcy

0.00

59,822.45

8. **From the Statement of Your Current Monthly Income:** Copy your total current monthly income from Official Form 122A-1 Line 11; **OR**, Form 122B Line 11; **OR**, Form 122C-1 Line 14.

520.92

O. Copy the following special categories of claims from Part 4, line 6 of Schedule E/F:

	Total clai	m
From Part 4 on Schedule E/F, copy the following:		
9a. Domestic support obligations (Copy line 6a.)	\$	0.00
9b. Taxes and certain other debts you owe the government. (Copy line 6b.)	\$	0.00
9c. Claims for death or personal injury while you were intoxicated. (Copy line 6c.)	\$	0.00
9d. Student loans. (Copy line 6f.)	\$	3,910.00
9e. Obligations arising out of a separation agreement or divorce that you did not report as priority claims. (Copy line 6g.)	\$	0.00
9f. Debts to pension or profit-sharing plans, and other similar debts. (Copy line 6h.)	+\$	0.00
9g. Total. Add lines 9a through 9f.	\$	3,910.00

Fill in this informat	ion to identify your case an	d this filing:		
		u uns ming.		
Debtor 1	Kenneth Markham First Name	fiddle Name Last Name		
Debtor 2	Amanda Markham			
(Spouse, if filing)	First Name N	liddle Name Last Name		
United States Bankr	uptcy Court for the: EASTE	RN DISTRICT OF MICHIGAN		
Case number 19-	40519			☐ Check if this is an
	10010			amended filing
Official Forn	n 106A/B			
_				
	A/B: Property			12/15
think it fits best. Be as	s complete and accurate as pos pace is needed, attach a separa	List an asset only once. If an asset fits in more than one isible. If two married people are filing together, both are te sheet to this form. On the top of any additional pages,	equally responsible for su	applying correct
Part 1: Describe Eac	h Residence, Building, Land, o	r Other Real Estate You Own or Have an Interest In		
1. Do you own or have	e any legal or equitable interest	in any residence, building, land, or similar property?		
_		2		
No. Go to Part 2.				
☐ Yes. Where is the	e property?			
Part 2: Describe You	ır Vehicles			
□ No ■ Yes				
3.1 Make: Sci	on	Who has an interest in the property? Check one		laims or exemptions. Put
Model: XD		■ Debtor 1 only		ed claims on Schedule D: ims Secured by Property.
Year: 200	· -	☐ Debtor 2 only	Current value of the	Current value of the
Approximate m		Debtor 1 and Debtor 2 only	entire property?	portion you own?
Other information		☐ At least one of the debtors and another		
Livonia MI	116 Newburgh, 18150	Check if this is community property (see instructions)	\$4,436.00	\$4,436.00
		I other recreational vehicles, other vehicles, and a ercraft, fishing vessels, snowmobiles, motorcycle according to the contraction of the contrac		
pages you have		for all of your entries from Part 2, including any enact number here		\$4,436.00
		erest in any of the following items?		Current value of the portion you own? Do not deduct secured claims or exemptions.
6. Household good	s and furnishings	obina kitobanwara		

Official Form 106A/B

□ No

page 1

Schedule A/B: Property

Debtor 1 Debtor 2	Kenneth Markham Amanda Markham	Case number (if known)	19-40519
Yes.	Describe		
	Household Goods and Furnishings Location: 9116 Newburgh, Livonia MI 48150		\$2,000.00
□ No	es: Televisions and radios; audio, video, stereo, and digital equipment; com including cell phones, cameras, media players, games Describe	nputers, printers, scanners; music co	ollections; electronic devices
	Household Electronics Location: 9116 Newburgh, Livonia MI 48150		\$1,000.00
Example No	bles of value es: Antiques and figurines; paintings, prints, or other artwork; books, picture other collections, memorabilia, collectibles Describe	es, or other art objects; stamp, coin,	or baseball card collections;
Example No	ent for sports and hobbies es: Sports, photographic, exercise, and other hobby equipment; bicycles, produced instruments Describe	ool tables, golf clubs, skis; canoes a	and kayaks; carpentry tools;
■ No	ns les: Pistols, rifles, shotguns, ammunition, and related equipment Describe		
□ No	s bles: Everyday clothes, furs, leather coats, designer wear, shoes, accessori Describe	es	
	All Clothing Location: 9116 Newburgh, Livonia MI 48150		\$500.00
	All Clothing Location: 9116 Newburgh, Livonia MI 48150		\$500.00
□ No	y les: Everyday jewelry, costume jewelry, engagement rings, wedding rings, Describe	heirloom jewelry, watches, gems, g	old, silver
	All Jewelry Location: 9116 Newburgh, Livonia MI 48150		\$400.00
	All Jewelry Location: 9116 Newburgh, Livonia MI 48150		\$9,500.00
Examp □ No	rm animals les: Dogs, cats, birds, horses Describe		

Official Form 106A/B

Schedule A/B: Property page 2

Debtor 1 Debtor 2	Kenneth Mar Amanda Mar			Case number (if known)	19-40519
		1 Dog Location: 9116 Newbu	rgh, Livonia MI 48150		\$300.00
■ No	other personal and		not already list, including an	y health aids you did not list	
		-	Part 3, including any entries fo		\$14,200.00
Part 4:	escribe Your Financ	ial Assets			
		gal or equitable interest ir	n any of the following?		Current value of the portion you own? Do not deduct secured claims or exemptions.
□ No	<i>mples:</i> Money you h	ave in your wallet, in your ho		on hand when you file your petition	no
				Cash Location: 9116 Newburgh, Livonia MI 48150	\$1,000.00
Exar			ounts; certificates of deposit; sh s with the same institution, list e Institution name:	nares in credit unions, brokerage heach.	nouses, and other similar
		17.1. Checking	Chime		\$0.00
<i>Exar</i> ■ No		or publicly traded stocks investment accounts with br Institution or issuer	okerage firms, money market a	ccounts	
joint	publicly traded sto venture	ock and interests in incorp	orated and unincorporated b	usinesses, including an interes	t in an LLC, partnership, and
■ No □ Yes	s. Give specific info	ormation about them Name of entity:		% of ownership:	
Nege Non- ■ No	otiable instruments i	include personal checks, casents are those you cannot trans	otiable and non-negotiable ins shiers' checks, promissory note ansfer to someone by signing or	s, and money orders.	
	•	Issuer name:			
<i>Exar</i> □ No		RA, ERISA, Keogh, 401(k), 4	403(b), thrift savings accounts, o	or other pension or profit-sharing	plans
	s. List each account orm 106A/B	separately.	Schedule A/B: Property		page 3

Debtor 1 Debtor 2	Kenneth M Amanda M			Case number (if known)	19-40519	
		Type of account:	Institution name:			
		Pension	Michigan Office of R	Retirement Services	\$193.77	
Your <i>Exam</i> ■ No	share of all unu		to that you may continue service , public utilities (electric, gas, wa Institution name or indiv	ter), telecommunications compan	ies, or others	
		t for a periodic payment of mor	ney to you, either for life or for a r			
		Issuer name and description.				
24. Interes 26 U.S ■ No	sts in an educa s.C. §§ 530(b)(1	ation IRA, in an account in a o), 529A(b), and 529(b)(1).	qualified ABLE program, or un	der a qualified state tuition pro	gram.	
☐ Yes		Institution name and description	on. Separately file the records of	any interests.11 U.S.C. § 521(c):		
■ No		future interests in property (other than anything listed in li	ne 1), and rights or powers exe	rcisable for your benefit	
Exam No Yes 27. Licens Exam No	nples: Internet d . Give specific ses, franchise nples: Building p	omain names, websites, proce information about them s, and other general intangib		agreements quor licenses, professional license	es	
Money or	r property owe	d to you?			Current value of the portion you own? Do not deduct secured claims or exemptions.	
28. Tax re	efunds owed to	o you			·	
■ No □ Yes	. Give specific i	nformation about them, including	ng whether you already filed the	returns and the tax years		
■ No		7 7 1	support, child support, maintena	nce, divorce settlement, property	settlement	
Exam ■ No	<i>nples:</i> Unpaid w	unpaid loans you made to som		y, vacation pay, workers' comper	nsation, Social Security	
Exam	sts in insurand aples: Health, di		h savings account (HSA); credit,	homeowner's, or renter's insuran	ice	
■ No □ Yes	. Name the insu	rance company of each policy Company name:		Beneficiary:	Surrender or refund value:	

Official Form 106A/B Schedule A/B: Property page 4

Debtor 1 Debtor 2	Kenneth Markham Amanda Markham	Case number (if known)	19-40519				
If you somed	32. Any interest in property that is due you from someone who has died If you are the beneficiary of a living trust, expect proceeds from a life insurance policy, or are currently entitled to receive property because someone has died. ■ No ☐ Yes. Give specific information						
Exam _i ■ No	s against third parties, whether or not you have filed a lawsuit or made a ples: Accidents, employment disputes, insurance claims, or rights to sue	demand for payment					
■ No	contingent and unliquidated claims of every nature, including countercla	aims of the debtor and rights to	set off claims				
■ No	Give specific information						
	the dollar value of all of your entries from Part 4, including any entries fo art 4. Write that number here	. • .	\$1,193.77				
Part 5: De	scribe Any Business-Related Property You Own or Have an Interest In. List any re	al estate in Part 1.					
37. Do you	own or have any legal or equitable interest in any business-related property?						
No. Go	to Part 6.						
☐ Yes. (Go to line 38.						
	scribe Any Farm- and Commercial Fishing-Related Property You Own or Have an lou own or have an interest in farmland, list it in Part 1.	Interest In.					
46. Do yo ı	own or have any legal or equitable interest in any farm- or commercial	fishing-related property?					
■ No.	Go to Part 7.						
☐ Yes	s. Go to line 47.						
Part 7:	Describe All Property You Own or Have an Interest in That You Did Not List Abo	ove					
Exam _i ■ No	have other property of any kind you did not already list? bles: Season tickets, country club membership Give specific information						
		1					
54. Add	the dollar value of all of your entries from Part 7. Write that number here		\$0.00				

Official Form 106A/B Schedule A/B: Property page 5

\$19,829.77

Total personal property. Add lines 56 through 61...

62.

\$19,829.77

\$19,829.77

Copy personal property total

Fill in this information to identify your case:						
Debtor 1	Kenneth Markhar	n				
	First Name	Middle Name	Last Name			
Debtor 2						
(Spouse if, filing)	First Name	Middle Name	Last Name			
United States Bankruptcy Court for the:		EASTERN DISTRICT C	OF MICHIGAN			
Case number	19-40519					
(if known)					☐ Check if this is an amended filing	

Official Form 106C

Part 1: Identify the Property You Claim as Exempt

Schedule C: The Property You Claim as Exempt

4/16

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. Using the property you listed on *Schedule A/B: Property* (Official Form 106A/B) as your source, list the property that you claim as exempt. If more space is needed, fill out and attach to this page as many copies of *Part 2: Additional Page* as necessary. On the top of any additional pages, write your name and case number (if known).

For each item of property you claim as exempt, you must specify the amount of the exemption you claim. One way of doing so is to state a specific dollar amount as exempt. Alternatively, you may claim the full fair market value of the property being exempted up to the amount of any applicable statutory limit. Some exemptions—such as those for health aids, rights to receive certain benefits, and tax-exempt retirement funds—may be unlimited in dollar amount. However, if you claim an exemption of 100% of fair market value under a law that limits the exemption to a particular dollar amount and the value of the property is determined to exceed that amount, your exemption would be limited to the applicable statutory amount.

1.	1. Which set of exemptions are you claiming? Check one only, even if your spouse is filing with you.							
	☐ You are claiming state and federal nonban	kruptcy exemptions.	11 U.S	S.C. § 522(b)(3)				
	■ You are claiming federal exemptions. 11 l	U.S.C. § 522(b)(2)						
2.	For any property you list on Schedule A/B that you claim as exempt, fill in the information below.							
	Brief description of the property and line on Schedule A/B that lists this property	Current value of the portion you own	Am	ount of the exemption you claim	Specific laws that allow exemption			
		Copy the value from Schedule A/B	Che	ck only one box for each exemption.				
De	ebtor 1 Exemptions Household Goods and Furnishings	\$2,000.00		\$1,000.00	11 U.S.C. § 522(d)(3)			
	Location: 9116 Newburgh, Livonia MI 48150 Line from Schedule A/B: 6.1			100% of fair market value, up to any applicable statutory limit				
	Household Electronics Location: 9116 Newburgh, Livonia MI	\$1,000.00		\$500.00	11 U.S.C. § 522(d)(3)			
	48150 Line from <i>Schedule A/B</i> : 7.1			100% of fair market value, up to any applicable statutory limit				
	All Clothing Location: 9116 Newburgh, Livonia MI	\$500.00		\$500.00	11 U.S.C. § 522(d)(3)			
	48150 Line from <i>Schedule A/B</i> : 11.1			100% of fair market value, up to any applicable statutory limit				
	All Jewelry Location: 9116 Newburgh, Livonia MI	\$400.00		\$400.00	11 U.S.C. § 522(d)(4)			
	48150 Line from <i>Schedule A/B</i> : 12.1			100% of fair market value, up to any applicable statutory limit				

Official Form 106C

48150

Schedule C: The Property You Claim as Exempt

\$300.00

page 1 of 4

11 U.S.C. § 522(d)(3)

\$150.00

100% of fair market value, up to

any applicable statutory limit

Location: 9116 Newburgh, Livonia MI

Line from Schedule A/B: 13.1

	Brief description of the property and line on Schedule A/B that lists this property	Current value of the portion you own	Amo	ount of the exemption you claim	Specific laws that allow exemption	
		Copy the value from Schedule A/B	Check only one box for each exemption.			
	Cash Location: 9116 Newburgh, Livonia MI	\$1,000.00		\$500.00	11 U.S.C. § 522(d)(5)	
	48150 Line from Schedule A/B: 16.1		100% of fair market value, up to any applicable statutory limit			
3.	Are you claiming a homestead exemption of more than \$160,375? (Subject to adjustment on 4/01/19 and every 3 years after that for cases filed on or after the date of adjustment.) No					
	Yes. Did you acquire the property covere No Yes	ed by the exemption with	hin 1	215 days before you filed this case	?	

Fill in this information to identify your case:						
Debtor 1						
	First Name	Middle Name	Last Name			
Debtor 2	Amanda Markhan	n				
(Spouse if, filing)	First Name	Middle Name	Last Name			
United States Ba	nkruptcy Court for the:	EASTERN DISTRICT C	PF MICHIGAN			
Case number	19-40519					
(if known)					Check if this is an	
					amended filing	

Official Form 106C

Schedule C: The Property You Claim as Exempt

4/16

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. Using the property you listed on Schedule A/B: Property (Official Form 106A/B) as your source, list the property that you claim as exempt. If more space is needed, fill out and attach to this page as many copies of Part 2: Additional Page as necessary. On the top of any additional pages, write your name and case number (if known).

For each item of property you claim as exempt, you must specify the amount of the exemption you claim. One way of doing so is to state a specific dollar amount as exempt. Alternatively, you may claim the full fair market value of the property being exempted up to the amount of any applicable statutory limit. Some exemptions—such as those for health aids, rights to receive certain benefits, and tax-exempt retirement funds—may be unlimited in dollar amount. However, if you claim an exemption of 100% of fair market value under a law that limits the exemption to a particular dollar amount and the value of the property is determined to exceed that amount, your exemption would be limited to the applicable statutory amount.

Ра	identify the Property You Claim as E	xempt					
1.	Which set of exemptions are you claiming?	? Check one only, ever	n if yo	our spouse is filing with you.			
	☐ You are claiming state and federal nonbank	kruptcy exemptions. 1	11 U.S	S.C. § 522(b)(3)			
	■ You are claiming federal exemptions. 11 L	J.S.C. § 522(b)(2)					
2.	For any property you list on Schedule A/B that you claim as exempt, fill in the information below.						
	Brief description of the property and line on Schedule A/B that lists this property	Current value of the portion you own	Am	ount of the exemption you claim	Specific laws that allow exemption		
		Copy the value from Schedule A/B	Che	eck only one box for each exemption.			
De	ebtor 2 Exemptions 2009 Scion XD 133,000 miles	\$4,436.00		\$3,775.00	11 U.S.C. § 522(d)(2)		
	Location: 9116 Newburgh, Livonia MI 48150 Line from Schedule A/B: 3.1			100% of fair market value, up to any applicable statutory limit			
	2009 Scion XD 133,000 miles	\$4,436.00		\$661.00	11 U.S.C. § 522(d)(5)		
	Location: 9116 Newburgh, Livonia MI 48150 Line from Schedule A/B: 3.1			100% of fair market value, up to any applicable statutory limit			
	Household Goods and Furnishings Location: 9116 Newburgh, Livonia MI	\$2,000.00		\$1,000.00	11 U.S.C. § 522(d)(3)		
	48150 Line from Schedule A/B: 6.1			100% of fair market value, up to any applicable statutory limit			
	Household Electronics Location: 9116 Newburgh, Livonia MI	\$1,000.00		\$500.00	11 U.S.C. § 522(d)(3)		

100% of fair market value, up to

any applicable statutory limit

Official Form 106C

48150

Line from Schedule A/B: 7.1

Schedule C: The Property You Claim as Exempt

	Brief description of the property and line on Schedule A/B that lists this property	Current value of the portion you own	· · · · · · · · · · · · · · · · · · ·		Specific laws that allow exemption
	, , ,	Copy the value from Schedule A/B	Che	eck only one box for each exemption.	
	All Clothing Location: 9116 Newburgh, Livonia MI	\$500.00		\$500.00	11 U.S.C. § 522(d)(3)
-	48150 Line from <i>Schedule A/B</i> : 11.2			100% of fair market value, up to any applicable statutory limit	
	All Jewelry Location: 9116 Newburgh, Livonia MI	\$9,500.00		\$1,600.00	11 U.S.C. § 522(d)(4)
	48150 Line from <i>Schedule A/B</i> : 12.2			100% of fair market value, up to any applicable statutory limit	
	All Jewelry Location: 9116 Newburgh, Livonia MI	\$9,500.00		\$7,900.00	11 U.S.C. § 522(d)(5)
	48150 Line from Schedule A/B: 12.2			100% of fair market value, up to any applicable statutory limit	
	1 Dog Location: 9116 Newburgh, Livonia MI	\$300.00		\$150.00	11 U.S.C. § 522(d)(3)
4	48150 Line from Schedule A/B: 13.1			100% of fair market value, up to any applicable statutory limit	
	Cash Location: 9116 Newburgh, Livonia MI	\$1,000.00		\$500.00	11 U.S.C. § 522(d)(5)
	48150 Line from Schedule A/B: 16.1			100% of fair market value, up to any applicable statutory limit	
	Pension: Michigan Office of Retirement Services	\$193.77		\$193.77	11 U.S.C. § 522(d)(12)
	Line from Schedule A/B: 21.1			100% of fair market value, up to any applicable statutory limit	
	Are you claiming a homestead exemption of (Subject to adjustment on 4/01/19 and every 3			led on or after the date of adjustme	nt.)
	■ No				
	Yes. Did you acquire the property covere	ed by the exemption wi	ithin 1	,215 days before you filed this case	?
	□ No □ Yes				
	☐ Yes				

Fill in this infor	mation to identify your	case:		
Debtor 1	Kenneth Markhar	n		
	First Name	Middle Name	Last Name	
Debtor 2	Amanda Markhar	n		
(Spouse if, filing)	First Name	Middle Name	Last Name	
United States Ba	ankruptcy Court for the:	EASTERN DISTRICT C	F MICHIGAN	
Case number	19-40519			
(if known)				☐ Check if this is an amended filing

Official Form 106D

Schedule D: Creditors Who Have Claims Secured by Property

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, copy the Additional Page, fill it out, number the entries, and attach it to this form. On the top of any additional pages, write your name and case

- 1. Do any creditors have claims secured by your property?
 - No. Check this box and submit this form to the court with your other schedules. You have nothing else to report on this form.
 - ☐ Yes. Fill in all of the information below.

Fill in th	nis informatio	on to identify your cas	se:					
Debtor 1	1 K	Kenneth Markham						
		irst Name	Middle Na	ime	Last Name			
Debtor 2		Amanda Markham						
(Spouse if,	, filing) Fi	irst Name	Middle Na	me	Last Name			
United S	States Bankru	ptcy Court for the:	EASTERN D	ISTRICT OF I	MICHIGAN			
Case nu	umber 19-4	0519						
(if known)		0010		_			П	Check if this is an
							a	amended filing
Sched		Creditors Who				Dow 2 for ore	iditees with NONDRIODITY ele	12/15
any execu Schedule Schedule left. Attac	utory contracts G: Executory D: Creditors V The Continuations of the Continuation of the Contin	or unexpired leases that Contracts and Unexpired Who Have Claims Secure ation Page to this page. I	at could resu d Leases (Of ed by Propert If you have n	It in a claim. Al ficial Form 1060 y. If more space o information to	so list executory 3). Do not include e is needed, copy	contracts on a e any creditors the Part you	ditors with NONPRIORITY cla Schedule A/B: Property (Offic s with partially secured claims need, fill it out, number the en at Part. On the top of any addi	ial Form 106A/B) and on s that are listed in stries in the boxes on the
		ave priority unsecured c						
_	lo. Go to Part 2.		iaiiiis agaiiis	it your				
Dort 2	_	Va NONDDIODITY I		Claim.				
Part 2:		Your NONPRIORITY (
3. Do a	iny creditors ha	ave nonpriority unsecure	ed claims ag	ainst you?				
□N	lo. You have no	thing to report in this part.	Submit this for	orm to the court	with your other sch	nedules.		
Y	es.							
unse	ecured claim, list one creditor ho	the creditor separately fo	r each claim.	For each claim li	isted, identify what	t type of claim it	claim. If a creditor has more that is. Do not list claims already industrity unsecured claims fill out the	cluded in Part 1. If more
								Total claim
4.1	34TH DISTE	RICT COURT		Last 4 digits of	account number	53GC		\$0.00
	Nonpriority Cred			When was the	debt incurred?			_
_	Romulus, N							
		City State Zip Code		As of the date y	ou file, the claim	is: Check all t	hat apply	
	_	the debt? Check one.		_				
	Debtor 1 on	•		☐ Contingent				
	Debtor 2 on	ly		☐ Unliquidated				
	Debtor 1 and	d Debtor 2 only		□ Disputed				
	☐ At least one	of the debtors and another	5 1		RIORITY unsecure	∍d claim:		
		is claim is for a commu	ility	Student loan				
	debt	bject to offset?				aration agreem	nent or divorce that you did not	
	_	pleor to ouser,		report as priority		ing plans and	other similar debts	
	■ No				•	01		
	☐ Yes			Other. Speci	_{fy} Civil Judg	ment - Noti	ce only	

Schedule E/F: Creditors Who Have Unsecured Claims

Page 1 of 19

Debtor Debtor	Kenneth Markham Amanda Markham		Case number (if known) 19-40519			
4.2	Ally	Last 4 digits of account number	0308	\$0.00		
	Nonpriority Creditor's Name	-				
	200 Renaissance Ctr Detroit, MI 48243	When was the debt incurred?	Opened 11/05 Last Active 12/02/10			
	Number Street City State Zip Code	As of the date you file, the claim	is: Check all that apply			
	Who incurred the debt? Check one.					
	■ Debtor 1 only	☐ Contingent				
	☐ Debtor 2 only	☐ Unliquidated				
	☐ Debtor 1 and Debtor 2 only	☐ Disputed				
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecure	d claim:			
	\square Check if this claim is for a community	☐ Student loans				
	debt Is the claim subject to offset?	☐ Obligations arising out of a separeport as priority claims	aration agreement or divorce that you did not			
	■ No	Debts to pension or profit-sharing	ng plans, and other similar debts			
	Yes	Other. Specify Automobil	e			
4.3	American Honda Finance	Last 4 digits of account number	3026	\$858.00		
	Nonpriority Creditor's Name	-	One and 40/45 Least Active			
	Attn: Bankruptcy Po Box 168088	When was the debt incurred?	Opened 10/15 Last Active 12/06/16			
	Irving, TX 75016	mon was the dest mountain.	12/00/10			
	Number Street City State Zip Code As of the date you file, the claim is: Check all that apply					
	Who incurred the debt? Check one.					
	Debtor 1 only	☐ Contingent				
	☐ Debtor 2 only	☐ Unliquidated				
	■ Debtor 1 and Debtor 2 only	☐ Disputed				
	\square At least one of the debtors and another	Type of NONPRIORITY unsecure	d claim:			
	☐ Check if this claim is for a community	Student loans				
	debt Is the claim subject to offset?	☐ Obligations arising out of a separe report as priority claims	Obligations arising out of a separation agreement or divorce that you did not ort as priority claims			
	No	Debts to pension or profit-sharing	ng plans, and other similar debts			
	Yes	Other. Specify Lease				
4.4	American Honda Finance	Last 4 digits of account number	4683	\$0.00		
	Nonpriority Creditor's Name		On an al 07/40 Last Astina			
	Attn: Bankruptcy Po Box 168088	When was the debt incurred?	Opened 07/13 Last Active 4/28/14			
	Irving, TX 75016	mion was the dest mountain.	4/20/14			
	Number Street City State Zip Code	As of the date you file, the claim	is: Check all that apply			
	Who incurred the debt? Check one.					
	Debtor 1 only	☐ Contingent				
	☐ Debtor 2 only	☐ Unliquidated				
	☐ Debtor 1 and Debtor 2 only	☐ Disputed				
	\square At least one of the debtors and another	Type of NONPRIORITY unsecure	d claim:			
	☐ Check if this claim is for a community	Student loans				
	debt Is the claim subject to offset?	☐ Obligations arising out of a separeport as priority claims	aration agreement or divorce that you did not			
	■ No	Debts to pension or profit-sharing	ng plans, and other similar debts			

☐ Yes

Schedule E/F: Creditors Who Have Unsecured Claims

■ Other. Specify Lease

Debtor Debtor	1 Kenneth Markham 2 Amanda Markham		Case number (if known) 19-40519		
4.5	American Honda Finance	Last 4 digits of account number	0112	\$0.00	
	Nonpriority Creditor's Name Attn: Bankruptcy Po Box 168088	Opened 01/14 Last Active 11/02/15			
	Irving, TX 75016 Number Street City State Zip Code Who incurred the debt? Check one.	As of the date you file, the claim	is: Check all that apply		
	Debtor 1 only	Пол			
	Debtor 2 only	☐ Contingent			
	■ Debtor 1 and Debtor 2 only	☐ Unliquidated			
	At least one of the debtors and another	☐ Disputed Type of NONPRIORITY unsecure	d claim:		
	_	☐ Student loans			
	☐ Check if this claim is for a community debt Is the claim subject to offset?	_	aration agreement or divorce that you did not		
	No	Debts to pension or profit-sharir	o plans, and other similar debts		
	■ No □ Yes	Other. Specify Automobile			
4.6	American Honda Finance Nonpriority Creditor's Name	Last 4 digits of account number	6329	\$0.00	
	Attn: Bankruptcy Po Box 168088 When was the debt incurred?		Opened 10/12 Last Active 1/23/14		
	Irving, TX 75016 Number Street City State Zip Code	_ As of the date you file, the claim	is: Check all that apply		
	Who incurred the debt? Check one.	,			
	☐ Debtor 1 only ☐ Contingent				
	Debtor 2 only	☐ Unliquidated			
	■ Debtor 1 and Debtor 2 only	☐ Disputed			
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecure	d claim:		
	☐ Check if this claim is for a community	☐ Student loans			
	debt Is the claim subject to offset?	Obligations arising out of a separeport as priority claims	aration agreement or divorce that you did not		
	■ No	Debts to pension or profit-sharing	o pension or profit-sharing plans, and other similar debts		
	Yes	■ Other. Specify Automobile)		
4.7	Americollect	Last 4 digits of account number	4536	\$69.00	
	Nonpriority Creditor's Name Po Box 1566	When was the debt incurred?	Opened 02/18		
	1851 South Alverno Road Manitowoc, WI 54221	When was the dept incurred?	Openeu 02/10		
	Number Street City State Zip Code Who incurred the debt? Check one.	As of the date you file, the claim	is: Check all that apply		
	■ Debtor 1 only	☐ Contingent			
	Debtor 2 only	☐ Unliquidated			
	Debtor 1 and Debtor 2 only	□ Disputed			
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecure	d claim:		
	☐ Check if this claim is for a community	☐ Student loans			
	debt Is the claim subject to offset?	Obligations arising out of a separeport as priority claims	ration agreement or divorce that you did not		
	No	Debts to pension or profit-sharing	g plans, and other similar debts		
	Yes	Collection Other. Specify Transport	Attorney Beaumont Med Service		

Schedule E/F: Creditors Who Have Unsecured Claims

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Debtor 1 Debtor 2	Kenneth Markham Amanda Markham		Case number (if known) 19-40519				
	Americollect Nonpriority Creditor's Name	Last 4 digits of account number	4561	\$66.00			
	Po Box 1566 1851 South Alverno Road	When was the debt incurred?	Opened 01/18				
_	Manitowoc, WI 54221 Number Street City State Zip Code Who incurred the debt? Check one.	As of the date you file, the claim	is: Check all that apply				
	■ Debtor 1 only	☐ Contingent					
	Debtor 2 only	☐ Unliquidated					
	Debtor 1 and Debtor 2 only	☐ Disputed					
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecure	d claim:				
	☐ Check if this claim is for a community	☐ Student loans					
	debt Is the claim subject to offset?	☐ Obligations arising out of a separeport as priority claims	aration agreement or divorce that you did not				
	■ No	Debts to pension or profit-sharing	g plans, and other similar debts				
	Yes	■ Other. Specify Collection Transport S	Attorney Beaumont Med Service				
	Amex	Last 4 digits of account number	3123	\$0.00			
	Nonpriority Creditor's Name Correspondence/Bankruptcy Po Box 981540	When was the debt incurred?	Opened 04/10 Last Active 01/19				
_	El Paso, TX 79998 Number Street City State Zip Code Who incurred the debt? Check one.	As of the date you file, the claim	is: Check all that apply				
	☐ Debtor 1 only	☐ Contingent					
	■ Debtor 2 only	☐ Unliquidated					
	☐ Debtor 1 and Debtor 2 only	☐ Disputed					
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecure	d claim:				
	☐ Check if this claim is for a community	☐ Student loans					
	debt Is the claim subject to offset?	report as priority claims	ration agreement or divorce that you did not				
	■ No	Debts to pension or profit-sharing	g plans, and other similar debts				
	Yes	Other. Specify Credit Card	<u> </u>				
0	Amex Nonpriority Creditor's Name	Last 4 digits of account number	7363	\$0.00			
	Correspondence/Bankruptcy Po Box 981540 El Paso, TX 79998	When was the debt incurred?	Opened 01/17 Last Active 01/19				
	Number Street City State Zip Code	As of the date you file, the claim	is: Check all that apply				
	Who incurred the debt? Check one.						
	■ Debtor 1 only	☐ Contingent					
	☐ Debtor 2 only	☐ Unliquidated					
	☐ Debtor 1 and Debtor 2 only	☐ Disputed					
	\square At least one of the debtors and another	Type of NONPRIORITY unsecure	d claim:				
	Check if this claim is for a community	☐ Student loans					
	debt Is the claim subject to offset?	report as priority claims	ration agreement or divorce that you did not				
	■ No	Debts to pension or profit-sharing					
	Yes	■ Other. Specify Credit Card	l				

Schedule E/F: Creditors Who Have Unsecured Claims

Debto Debto	or 1 Kenneth Markham or 2 Amanda Markham		Case number (if known) 19-40519		
.1	Arbor Professional Solutions	Last 4 digits of account number	6305	\$327.00	
	Nonpriority Creditor's Name Attn: Bankruptcy 2090 South Main Street Ann Arbor, MI 48103	When was the debt incurred?	-		
	Number Street City State Zip Code Who incurred the debt? Check one.	As of the date you file, the claim	is: Check all that apply		
	■ Debtor 1 only	☐ Contingent			
	☐ Debtor 2 only	☐ Unliquidated			
	☐ Debtor 1 and Debtor 2 only	☐ Disputed			
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecure	d claim:		
	☐ Check if this claim is for a community debt		aration agreement or divorce that you did not		
	Is the claim subject to offset?	report as priority claims			
	No	☐ Debts to pension or profit-sharing			
	Yes	Other. Specify Collection	Attorney Michigan Heart	-	
4.1	Bank Of America	Last 4 digits of account number	4432	\$1,231.00	
	Nonpriority Creditor's Name Attn: Bankruptcy Po Box 982238 El Paso, TX 79998	When was the debt incurred?	Opened 09/14 Last Active 10/27/16	-	
	Number Street City State Zip Code Who incurred the debt? Check one.	As of the date you file, the claim			
	☐ Debtor 1 only	☐ Contingent			
	☐ Debtor 2 only	☐ Unliquidated			
	■ Debtor 1 and Debtor 2 only	☐ Disputed			
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecure	d claim:		
	☐ Check if this claim is for a community	☐ Student loans			
	debt Is the claim subject to offset?	☐ Obligations arising out of a separeport as priority claims	aration agreement or divorce that you did not		
	No	☐ Debts to pension or profit-sharing	g plans, and other similar debts		
	Yes	■ Other. Specify Automobile	-		
l.1 3	BEAUMONT HOSPITAL	Last 4 digits of account number		\$68.43	
	Nonpriority Creditor's Name P.O. Box 554878 Detroit. MI 48255-4878	When was the debt incurred?	When was the debt incurred?		
	Number Street City State Zip Code	As of the date you file, the claim			
	Who incurred the debt? Check one.				
	☐ Debtor 1 only	☐ Contingent			
	■ Debtor 2 only	☐ Unliquidated			
	☐ Debtor 1 and Debtor 2 only	☐ Disputed			
	☐ At least one of the debtors and another	east one of the debtors and another Type of NONPRIORITY unsecured claim:			
	☐ Check if this claim is for a community	☐ Student loans			
	debt Is the claim subject to offset?	Obligations arising out of a separeport as priority claims	aration agreement or divorce that you did not		

■ No ☐ Yes

Schedule E/F: Creditors Who Have Unsecured Claims

Other. Specify

 $\hfill\square$ Debts to pension or profit-sharing plans, and other similar debts

Debtor Debtor	1 Kenneth Markham 2 Amanda Markham		Case number (if known) 19-40519		
4.1	Capital One	Last 4 digits of account number	7637	\$8,703.00	
	Nonpriority Creditor's Name Attn: Bankruptcy Po Box 30285 Salt Lake City, UT 84130	When was the debt incurred?	Opened 09/14 Last Active 12/17/15		
	Number Street City State Zip Code Who incurred the debt? Check one.	As of the date you file, the claim	is: Check all that apply		
	☐ Debtor 1 only	☐ Contingent			
	■ Debtor 2 only	☐ Unliquidated			
	☐ Debtor 1 and Debtor 2 only	☐ Disputed			
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecure	d claim:		
	☐ Check if this claim is for a community	☐ Student loans			
	debt Is the claim subject to offset?	☐ Obligations arising out of a separeport as priority claims	ration agreement or divorce that you did not		
	■ No	Debts to pension or profit-sharing	g plans, and other similar debts		
	☐ Yes	Other. Specify Credit Card	I		
4.1	Capital One	Last 4 digits of account number	1084	\$2,529.00	
	Nonpriority Creditor's Name Attn: Bankruptcy Po Box 30285 Salt Lake City, UT 84130	When was the debt incurred?	Opened 10/10 Last Active 7/11/16		
	Number Street City State Zip Code Who incurred the debt? Check one.	As of the date you file, the claim	is: Check all that apply		
	Debtor 1 only	☐ Contingent			
	☐ Debtor 2 only	☐ Unliquidated			
	☐ Debtor 1 and Debtor 2 only	☐ Disputed			
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:		
	☐ Check if this claim is for a community	☐ Student loans			
	debt Is the claim subject to offset?	Obligations arising out of a separeport as priority claims			
	No	Debts to pension or profit-sharing	g plans, and other similar debts		
	Yes	Other. Specify Credit Card			
4.1	Capital One	Last 4 digits of account number	1039	\$0.00	
	Nonpriority Creditor's Name Attn: Bankruptcy Po Box 30285	When was the debt incurred?	Opened 03/11 Last Active 1/16/13		
	Salt Lake City, UT 84130				
	Number Street City State Zip Code Who incurred the debt? Check one.	As of the date you file, the claim			
	■ Debtor 1 only	☐ Contingent			
	☐ Debtor 2 only	☐ Unliquidated			
	☐ Debtor 1 and Debtor 2 only	btor 2 only			
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:			
	☐ Check if this claim is for a community debt	☐ Student loans ☐ Obligations arising out of a sepa	ration agreement or divorce that you did not		
	Is the claim subject to offset?	report as priority claims	-		

■ No

☐ Yes

Schedule E/F: Creditors Who Have Unsecured Claims

■ Other. Specify Credit Card

 $\hfill\square$ Debts to pension or profit-sharing plans, and other similar debts

	Case number (if known) 19-40519		
Last 4 digits of account number	9754	\$	
When was the debt incurred?	Opened 11/29/11 Last Active 3/29/13		
As of the date you file, the claim	is: Check all that apply		
As of the date you me, the dam's	от опеск ан так арргу		
Contingent			
_ '			
'	d claim:		
<u></u> '	a Graini.		
_	gration agreement or divorce that you did not		
report as priority claims	manon agreement or divorce that you did not		
Debts to pension or profit-sharing	ng plans, and other similar debts		
Other. Specify Credit Card	<u> </u>		
Last 4 digits of account number	8085	\$	
_	On and 7/00/44 Least Assistan		
When was the debt incurred?	9/08/16		
As of the date you file, the claim	is: Check all that apply		
☐ Contingent			
<u> </u>			
Type of NONPRIORITY unsecured claim:			
☐ Student loans			
\square Obligations arising out of a separation agreement or divorce that you did not report as priority claims			
☐ Debts to pension or profit-sharing plans, and other similar debts			
Other. Specify Farmers Ho	ome Administration FHMA		
Last A digite of account number	0069	\$	
Last 4 digits of account number		Ψ	
When was the debt incurred?	Opened 05/03 Last Active 10/10/08		
As of the date you file, the claim i	is: Check all that apply		
As of the date you file, the claim	is: Check all that apply		
_	is: Check all that apply		
☐ Contingent	is: Check all that apply		
_	is: Check all that apply		
	When was the debt incurred? As of the date you file, the claim Contingent Unliquidated Disputed Type of NONPRIORITY unsecuree Student loans Debts to pension or profit-sharin Other. Specify Credit Carc Last 4 digits of account number When was the debt incurred? As of the date you file, the claim Contingent Unliquidated Disputed Type of NONPRIORITY unsecuree Student loans Obligations arising out of a separeport as priority claims Debts to pension or profit-sharin Student loans Obligations arising out of a separeport as priority claims Debts to pension or profit-sharin Other. Specify Farmers Ho	When was the debt incurred? As of the date you file, the claim is: Check all that apply Contingent Unliquidated Disputed Type of NONPRIORITY unsecured claim: Debts to pension or profit-sharing plans, and other similar debts Contingent Other. Specify Credit Card Last 4 digits of account number When was the debt incurred? As of the date you file, the claim is: Check all that apply Contingent Unliquidated Disputed Type of NONPRIORITY unsecured claim: Contingent Unliquidated Disputed Type of NONPRIORITY unsecured claim: Student loans Obligations arising out of a separation agreement or divorce that you did not report as priority claims Debts to pension or profit-sharing plans, and other similar debts Farmers Home Administration FHMA Last 4 digits of account number Other. Specify Farmers Home Administration FHMA Opened 05/03 Last Active	

debt

■ No ☐ Yes

Schedule E/F: Creditors Who Have Unsecured Claims

■ Other. Specify Credit Card

☐ Student loans

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 \square Check if this claim is for a community

Is the claim subject to offset?

 $\hfill \Box$ Obligations arising out of a separation agreement or divorce that you did not report as priority claims

 $\hfill\square$ Debts to pension or profit-sharing plans, and other similar debts

Debto	or 2 Amanda Markham		Case number (if known) 19-40519	
4.2 0	Coffman & Fox, D.O., P.C.	Last 4 digits of account number	5850	\$70.00
	Nonpriority Creditor's Name Arbor Hills Medical 24300 Orchard Lake Rd. Farmington, MI 48336	When was the debt incurred?		
	Number Street City State Zip Code Who incurred the debt? Check one.	As of the date you file, the claim	is: Check all that apply	
	■ Debtor 1 only	☐ Contingent		
	☐ Debtor 2 only	☐ Unliquidated		
	Debtor 1 and Debtor 2 only	☐ Disputed		
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecure	d claim:	
	☐ Check if this claim is for a community	☐ Student loans		
	debt Is the claim subject to offset?	Obligations arising out of a separeport as priority claims	aration agreement or divorce that you did not	
	■ No	Debts to pension or profit-sharing	ng plans, and other similar debts	
	Yes	Other. Specify		
4.2	Credit Union ONE	Last 4 digits of account number	6465	\$8,470.00
1	Nonpriority Creditor's Name	Last 4 digits of account number		ψο, π σισσ
	Attn: Bankruptcy 400 East Nine Mile Road Ferndale, MI 48220	When was the debt incurred?	Opened 04/14 Last Active 11/22/17	
	Number Street City State Zip Code	As of the date you file, the claim	is: Check all that apply	
	Who incurred the debt? Check one.			
	☐ Debtor 1 only	☐ Contingent		
	Debtor 2 only	☐ Unliquidated		
	■ Debtor 1 and Debtor 2 only	☐ Disputed		
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecure	d claim:	
	☐ Check if this claim is for a community	☐ Student loans		
	debt Is the claim subject to offset?	Obligations arising out of a separeport as priority claims	aration agreement or divorce that you did not	
	■ No	☐ Debts to pension or profit-sharir	ng plans, and other similar debts	
	Yes	Other. Specify Automobile	9	
4.2	DTE ENERGY		2441	\$901.80
2	Nonpriority Creditor's Name BANKRUPTCY DEPT.	Last 4 digits of account number When was the debt incurred?		φ301.00
	P.O. BOX 8037 Detroit, MI 48208	when was the dest incurred:		
	Number Street City State Zip Code	As of the date you file, the claim	is: Check all that apply	
	Who incurred the debt? Check one.			
	■ Debtor 1 only	☐ Contingent		
	☐ Debtor 2 only	☐ Unliquidated		
	☐ Debtor 1 and Debtor 2 only	☐ Disputed		
		Type of NONPRIORITY unsecure		

debt

■ No ☐ Yes

Schedule E/F: Creditors Who Have Unsecured Claims

☐ Student loans

Other. Specify

☐ Check if this claim is for a community

Is the claim subject to offset?

 $\hfill \Box$ Obligations arising out of a separation agreement or divorce that you did not report as priority claims

 $\hfill\square$ Debts to pension or profit-sharing plans, and other similar debts

2 Amanda Markham		Case number (if known) 19-40519	
Elan Financial Service	Last 4 digits of account number	7264	
Nonpriority Creditor's Name Attn: Bankruptcy 4801 Frederica Street Owensboro, KY 42301	When was the debt incurred?	Opened 4/01/06 Last Active 6/30/11	
Number Street City State Zip Code	As of the date you file, the claim	is: Check all that apply	
Who incurred the debt? Check one.	_		
Debtor 1 only	☐ Contingent		
Debtor 2 only	☐ Unliquidated		
Debtor 1 and Debtor 2 only	☐ Disputed		
At least one of the debtors and another	Type of NONPRIORITY unsecure	d claim:	
☐ Check if this claim is for a community debt Is the claim subject to offset?	☐ Student loans ☐ Obligations arising out of a separeport as priority claims	aration agreement or divorce that you did not	
■ No	Debts to pension or profit-sharir	or plans, and other similar debts	
□ Yes	■ Other. Specify Credit Card		
FedLoan Servicing Nonpriority Creditor's Name Attn: Bankruptcy Po Box 69184 Harrisburg, PA 17106 Number Street City State Zip Code	Last 4 digits of account number When was the debt incurred? As of the date you file, the claim	Opened 03/10 Last Active 2/15/17 is: Check all that apply	\$2,1
Who incurred the debt? Check one.	O continuent		
Debtor 1 only	☐ Contingent		
Debtor 2 only	☐ Unliquidated		
Debtor 1 and Debtor 2 only	☐ Disputed Type of NONPRIORITY unsecure	d claim:	
At least one of the debtors and another	Student loans	- O	
☐ Check if this claim is for a community debt Is the claim subject to offset?		aration agreement or divorce that you did not	
■ No	Debts to pension or profit-sharir	ng plans, and other similar debts	
□ Yes	□ Other. Specify		
	Educationa	al	
FedLoan Servicing	Last 4 digits of account number	0002	\$1,7
Nonpriority Creditor's Name Po Box 60610 Harrisburg, PA 17106	When was the debt incurred?	Opened 03/10 Last Active 2/15/17	
Number Street City State Zip Code Who incurred the debt? Check one.	As of the date you file, the claim	is: Check all that apply	
■ Debtor 1 only	☐ Contingent		
Debtor 2 only	☐ Unliquidated		

debt

■ No ☐ Yes

Schedule E/F: Creditors Who Have Unsecured Claims

Student loans

Other. Specify

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Debtor 1 and Debtor 2 only

Is the claim subject to offset?

☐ At least one of the debtors and another

☐ Check if this claim is for a community

Type of NONPRIORITY unsecured claim:

 $\hfill \Box$ Obligations arising out of a separation agreement or divorce that you did not report as priority claims

 $\hfill\square$ Debts to pension or profit-sharing plans, and other similar debts

Educational

Debtor Debtor	1 Kenneth Markham 2 Amanda Markham		Case number (if known) 19-40519			
4.2	Fingerhut	Last 4 digits of account number	0021	\$0.00		
	Nonpriority Creditor's Name Attn: Bankruptcy Po Box 1250 Saint Cloud, MN 56395	When was the debt incurred?	Opened 12/16 Last Active 7/05/18			
	Number Street City State Zip Code Who incurred the debt? Check one.	As of the date you file, the claim				
	☐ Debtor 1 only	☐ Contingent	☐ Contingent			
	■ Debtor 2 only	☐ Unliquidated				
	☐ Debtor 1 and Debtor 2 only	☐ Disputed				
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecure	d claim:			
	☐ Check if this claim is for a community	☐ Student loans				
	debt Is the claim subject to offset?	Obligations arising out of a separeport as priority claims	aration agreement or divorce that you did not			
	No	Debts to pension or profit-sharing	g plans, and other similar debts			
	Yes	Other. Specify Charge Acc				
4.2	Fingerhut	Last 4 digits of account number	0698	\$0.00		
	Nonpriority Creditor's Name Attn: Bankruptcy Po Box 1250 Saint Cloud, MN 56395	When was the debt incurred?	Opened 11/17 Last Active 7/24/18			
	Number Street City State Zip Code Who incurred the debt? Check one.	As of the date you file, the claim				
	■ Debtor 1 only	☐ Contingent	☐ Contingent			
	Debtor 2 only	☐ Unliquidated				
	☐ Debtor 1 and Debtor 2 only	☐ Disputed				
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecure	nsecured claim:			
	☐ Check if this claim is for a community	☐ Student loans	☐ Student loans			
	debt Is the claim subject to offset?	Obligations arising out of a separeport as priority claims	ration agreement or divorce that you did not			
	■ No	Debts to pension or profit-sharing	g plans, and other similar debts			
	Yes	count				
4.2	First National Bank	Last 4 digits of account number	4231	\$0.00		
	Nonpriority Creditor's Name	_				
	Attn: Tina 1620 Dodge St Mailstop 4440 Omaha, NE 68197	When was the debt incurred?	Opened 7/01/16 Last Active 1/10/18			
	Number Street City State Zip Code Who incurred the debt? Check one.	As of the date you file, the claim				
	☐ Debtor 1 only	☐ Contingent				
	Debtor 2 only	☐ Unliquidated				
	■ Debtor 1 and Debtor 2 only	☐ Disputed				
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecure	d claim:			
	☐ Check if this claim is for a community	☐ Student loans				
	debt Is the claim subject to offset?	☐ Obligations arising out of a separeport as priority claims	aration agreement or divorce that you did not			

■ No ☐ Yes

Schedule E/F: Creditors Who Have Unsecured Claims

■ Other. Specify Credit Card

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 $\hfill\square$ Debts to pension or profit-sharing plans, and other similar debts

First National Bank	Last 4 digits of account number	3221	9		
Nonpriority Creditor's Name		Opened 7/01/16 Last Active			
P.o. Box 3412 Omaha, NE 68197	When was the debt incurred?				
Number Street City State Zip Code	As of the date you file, the claim	As of the date you file, the claim is: Check all that apply			
Who incurred the debt? Check one.					
☐ Debtor 1 only	☐ Contingent				
☐ Debtor 2 only	☐ Unliquidated				
■ Debtor 1 and Debtor 2 only	☐ Disputed				
☐ At least one of the debtors and another	Type of NONPRIORITY unsecure	d claim:			
☐ Check if this claim is for a community	☐ Student loans				
debt	Obligations arising out of a sepa	aration agreement or divorce that you did not			
Is the claim subject to offset?	report as priority claims				
■ No	☐ Debts to pension or profit-sharing	g plans, and other similar debts			
Yes	Other. Specify Credit Card	<u> </u>			
Harley Davidson Financial	Look & dissite of account mumbers	1362	9		
Nonpriority Creditor's Name	Last 4 digits of account number		4		
Attn: Bankruptcy		Opened 04/13 Last Active			
Po Box 22048	When was the debt incurred?	5/16/14			
Carson City, NV 89721					
Number Street City State Zip Code Who incurred the debt? Check one.	As of the date you file, the claim	Is: Check all that apply			
Debtor 1 only					
_	☐ Contingent				
Debtor 2 only	Unliquidated				
■ Debtor 1 and Debtor 2 only	☐ Disputed				
☐ At least one of the debtors and another	Type of NONPRIORITY unsecure	d claim:			
Check if this claim is for a community	Student loans				
debt Is the claim subject to offset?		aration agreement or divorce that you did not			
<u> </u>	report as priority claims	a plane, and other similar delete			
■ No	Debts to pension or profit-sharir				
Yes	■ Other. Specify Automobile)			
Jefferson Capital Systems, LLC	Last 4 digits of account number	3003	\$1,49		
Nonpriority Creditor's Name	_				
16 Mcleland Rd	When was the debt incurred?	Opened 07/18			
Saint Cloud, MN 56303 Number Street City State Zip Code	As of the date you file, the claim	is: Check all that apply			
Who incurred the debt? Check one.	c and you me, the olumn	Chook all that apply			
Debtor 1 only	Contingent				
■ Debtor 2 only	☐ Contingent				
_	☐ Unliquidated				
Debtor 1 and Debtor 2 only	Disputed	d alaim.			
At least one of the debtors and another	Type of NONPRIORITY unsecured Student loans	o ciaim:			
Chack if this claim is for a community					

debt

■ No

☐ Yes

Is the claim subject to offset?

Schedule E/F: Creditors Who Have Unsecured Claims

Other Specify Advantage

report as priority claims

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 \square Obligations arising out of a separation agreement or divorce that you did not

Factoring Company Account Fingerhut

 $\hfill\square$ Debts to pension or profit-sharing plans, and other similar debts

Jefferson Capital Systems, LLC	Last 4 digits of account number	8003	\$5		
Nonpriority Creditor's Name Po Box 1999 Saint Cloud, MN 56302	When was the debt incurred?	Opened 08/18			
Number Street City State Zip Code	As of the date you file, the claim	s: Check all that apply			
Who incurred the debt? Check one.					
Debtor 1 only	☐ Contingent				
Debtor 2 only	☐ Unliquidated				
Debtor 1 and Debtor 2 only	☐ Disputed				
☐ At least one of the debtors and another	Type of NONPRIORITY unsecure	d claim:			
☐ Check if this claim is for a community	☐ Student loans				
debt Is the claim subject to offset?		ration agreement or divorce that you did not			
■ No	Debts to pension or profit-sharing	g plans, and other similar debts			
	Factoring Company Account Fingerhut				
Yes	Other. Specify Advantage				
Katherine Hayes	Last 4 digits of account number		\$5,5		
Nonpriority Creditor's Name 1219 Chevy Chase Dr. Sun City Center, FL 33573	When was the debt incurred?	2016			
Number Street City State Zip Code	As of the date you file, the claim	s: Check all that apply			
Who incurred the debt? Check one.					
Debtor 1 only	☐ Contingent				
Debtor 2 only	☐ Unliquidated				
■ Debtor 1 and Debtor 2 only	☐ Disputed				
At least one of the debtors and another	Type of NONPRIORITY unsecure	d claim:			
☐ Check if this claim is for a community	☐ Student loans				
debt Is the claim subject to offset?	Obligations arising out of a separeport as priority claims	ration agreement or divorce that you did not			
■ No	Debts to pension or profit-sharing	g plans, and other similar debts			
Yes	Other. Specify				
Kohls/Capital One Nonpriority Creditor's Name	Last 4 digits of account number	0815			
Kohls Credit		Opened 07/96 Last Active			
Po Box 3120	When was the debt incurred?	1/10/18			
Milwaukee, WI 53201	_				
Number Street City State Zip Code	As of the date you file, the claim				

Debtor 2 only ■ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: lacksquare At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community $\hfill\square$ Obligations arising out of a separation agreement or divorce that you did not debt Is the claim subject to offset? report as priority claims $\hfill\square$ Debts to pension or profit-sharing plans, and other similar debts ■ No ■ Other. Specify Charge Account ☐ Yes

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Schedule E/F: Creditors Who Have Unsecured Claims

19-40519 ber (if known) 4.3 Lake Trust Credit Union 3520 \$0.00 Last 4 digits of account number 5 Nonpriority Creditor's Name Opened 06/12 Last Active Attn: Bankruptcy Department 4605 S. Old Us Highway 23 When was the debt incurred? 8/07/13 Brighton, MI 48114 Number Street City State Zip Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only ☐ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt \square Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims ■ No ☐ Debts to pension or profit-sharing plans, and other similar debts ☐ Yes Secured Other, Specify 4.3 Midland Funding 6266 \$3,838.00 Last 4 digits of account number 6 Nonpriority Creditor's Name 2365 Northside Dr Ste 300 When was the debt incurred? **Opened 01/17** San Diego, CA 92108 Number Street City State Zip Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. Debtor 1 only ☐ Contingent Debtor 2 only ■ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims ■ No Debts to pension or profit-sharing plans, and other similar debts **Factoring Company Account Synchrony** ☐ Yes Other. Specify 4.3 Midland Funding 7137 \$1,825.00 Last 4 digits of account number Nonpriority Creditor's Name 2365 Northside Dr Ste 300 When was the debt incurred? **Opened 07/17** San Diego, CA 92108 Number Street City State Zip Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. Debtor 1 only ☐ Contingent Debtor 2 only □ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt ☐ Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims

☐ Yes

Official Form 106 E/F

■ No

Schedule E/F: Creditors Who Have Unsecured Claims

Other. Specify

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Bank

☐ Debts to pension or profit-sharing plans, and other similar debts

Factoring Company Account Synchrony

Amanda Markham		Case number (if known) 19-40519	
Midwest Receivable Sol	Last 4 digits of account number	8496	\$
Nonpriority Creditor's Name Attn: Bankruptcy 2323 Gull Rd, Ste E Kalamazoo, MI 49048	When was the debt incurred?	Opened 05/18	
Number Street City State Zip Code	As of the date you file, the claim	is: Check all that apply	
Who incurred the debt? Check one.	_		
Debtor 1 only	Contingent		
Debtor 2 only	Unliquidated		
Debtor 1 and Debtor 2 only	☐ Disputed		
At least one of the debtors and another	Type of NONPRIORITY unsecure	d claim:	
☐ Check if this claim is for a community debt	☐ Student loans ☐ Obligations arising out of a sepa	aration agreement or divorce that you did not	
ls the claim subject to offset?	report as priority claims		
No	Debts to pension or profit-sharing	ng plans, and other similar debts	
□ Yes	Other. Specify Centers	Attorney Binson S Home Health	
Pack-Rat	Last 4 digits of account number	7149	\$
Nonpriority Creditor's Name 46201 5 Mile Rd. Plymouth, MI 48170	When was the debt incurred?	8/31/2018	
Number Street City State Zip Code	As of the date you file, the claim	is: Check all that apply	
Who incurred the debt? Check one.			
Debtor 1 only	☐ Contingent		
Debtor 2 only	☐ Unliquidated		
Debtor 1 and Debtor 2 only	☐ Disputed		
At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:	
Check if this claim is for a community	☐ Student loans		
debt Is the claim subject to offset?	Obligations arising out of a separeport as priority claims	aration agreement or divorce that you did not	
No	Debts to pension or profit-sharing	g plans, and other similar debts	
☐ Yes	Other. Specify		
Portfolio Recovery	Last 4 digits of account number	8868	\$7,
Nonpriority Creditor's Name Po Box 41021	When was the debt incurred?	Opened 03/18	<u>-</u>
Norfolk, VA 23541	— An adding data of the state of	in Charle all that are the	
Number Street City State Zip Code Who incurred the debt? Check one.	As of the date you file, the claim	s: Спеск ан tnat apply	
■ Debtor 1 only	☐ Contingent		
Debtor 2 only	☐ Unliquidated		
	•		
Debtor 1 and Debtor 2 only	☐ Disputed		
☐ Debtor 1 and Debtor 2 only ☐ At least one of the debtors and another	☐ Disputed Type of NONPRIORITY unsecure	d claim:	

debt

■ No

☐ Yes

Schedule E/F: Creditors Who Have Unsecured Claims

☐ Student loans

report as priority claims

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☐ At least one of the debtors and another

Is the claim subject to offset?

☐ Check if this claim is for a community

Other Specify Bank Usa N.A.

 $\hfill\square$ Obligations arising out of a separation agreement or divorce that you did not

Factoring Company Account Capital One

 $\hfill\square$ Debts to pension or profit-sharing plans, and other similar debts

2 Amanda Markham		Case number (if known) 19-40519		
Portfolio Recovery	Last 4 digits of account number	1793	\$5,8	
Nonpriority Creditor's Name Po Box 41021 Norfolk, VA 23541	When was the debt incurred?	Opened 09/17		
Number Street City State Zip Code	As of the date you file, the claim	is: Check all that apply		
Who incurred the debt? Check one.	_			
Debtor 1 only	Contingent			
Debtor 2 only	☐ Unliquidated			
☐ Debtor 1 and Debtor 2 only	☐ Disputed			
☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:			
Check if this claim is for a community	Student loans			
debt Is the claim subject to offset?	☐ Obligations arising out of a separeport as priority claims	aration agreement or divorce that you did not		
■ No	Debts to pension or profit-sharing	ng plans, and other similar debts		
Yes	■ Other. Specify Bank Usa	Company Account Capital One N.A.		
Portfolio Recovery	Last 4 digits of account number	0562	\$2,7	
Nonpriority Creditor's Name Po Box 41021 Norfolk, VA 23541	When was the debt incurred?	Opened 09/17		
Number Street City State Zip Code	As of the date you file, the claim	is: Check all that apply		
Who incurred the debt? Check one.				
Debtor 1 only	☐ Contingent			
Debtor 2 only	☐ Unliquidated			
☐ Debtor 1 and Debtor 2 only	☐ Disputed			
☐ At least one of the debtors and another	Type of NONPRIORITY unsecure	d claim:		
☐ Check if this claim is for a community	☐ Student loans			
debt Is the claim subject to offset?	Obligations arising out of a separeport as priority claims	aration agreement or divorce that you did not		
■ No	Debts to pension or profit-sharing	ng plans, and other similar debts		
☐ Yes	■ Other. Specify	Company Account U.S. Bank ssociation		
Portfolio Recovery	Last 4 digits of account number	0508	\$2,0	
Nonpriority Creditor's Name Po Box 41021 Norfalk, VA 23544	When was the debt incurred?	Opened 12/16		
Norfolk, VA 23541	As of the date you file, the claim	is: Check all that apply		
Number Street City State Zip Code				
	,			
Who incurred the debt? Check one.	_			
Number Street City State Zip Code Who incurred the debt? Check one. Debtor 1 only Debtor 2 only	☐ Contingent ☐ Unliquidated			

Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans \square Check if this claim is for a community $\hfill \Box$ Obligations arising out of a separation agreement or divorce that you did not report as priority claims debt Is the claim subject to offset? \square Debts to pension or profit-sharing plans, and other similar debts ■ No **Factoring Company Account Synchrony** Other. Specify Bank ☐ Yes

Official Form 106 E/F

Schedule E/F: Creditors Who Have Unsecured Claims

Amanda Markham		Case number (if known) 19-40519	
scheer, Green & Burke, Co. L.P.A.	Last 4 digits of account number	3223	\$3
onpriority Creditor's Name Seagate Suite 640 Toledo, OH 43604-1558	When was the debt incurred?		
umber Street City State Zip Code /ho incurred the debt? Check one.	As of the date you file, the claim	s: Check all that apply	
Debtor 1 only	☐ Contingent		
Debtor 2 only	☐ Unliquidated		
Debtor 1 and Debtor 2 only	☐ Disputed		
At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:	
Check if this claim is for a community	☐ Student loans		
ebt		ration agreement or divorce that you did not	
the claim subject to offset?	report as priority claims		
No	Debts to pension or profit-sharing	g plans, and other similar debts	
Yes	Other. Specify		
yncb Bank/American Eagle	Last 4 digits of account number	0508	
onpriority Creditor's Name		Opened 02/09 Last Active	
o Box 965005 Orlando, FL 32896	When was the debt incurred?	5/02/16	
umber Street City State Zip Code	As of the date you file, the claim	s: Check all that apply	
/ho incurred the debt? Check one.			
Debtor 1 only	☐ Contingent		
Debtor 2 only	☐ Unliquidated		
Debtor 1 and Debtor 2 only	☐ Disputed		
At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:	
Check if this claim is for a community	Student loans		
ebt the claim subject to offset?	Obligations arising out of a separeport as priority claims	ration agreement or divorce that you did not	
No	Debts to pension or profit-sharing	g plans, and other similar debts	
] Yes	■ Other Specify Charge Acc	• •	

Opened 5/27/12 Last Active Attn: Bankruptcy Po Box 965060 When was the debt incurred? 5/20/13

Orlando, FL 32896

Number Street City State Zip Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one.

Debtor 1 only ☐ Contingent Debtor 2 only ☐ Unliquidated ■ Debtor 1 and Debtor 2 only ☐ Disputed

Type of NONPRIORITY unsecured claim: lacksquare At least one of the debtors and another

☐ Student loans ☐ Check if this claim is for a community debt $\hfill\square$ Obligations arising out of a separation agreement or divorce that you did not

Is the claim subject to offset? report as priority claims $\hfill\square$ Debts to pension or profit-sharing plans, and other similar debts ■ No

■ Other. Specify Charge Account

Official Form 106 E/F

☐ Yes

Schedule E/F: Creditors Who Have Unsecured Claims

Debto	r 2 Amanda Markham		Case number (if known) 19-40519	
4.4 7	Synchrony Bank	Last 4 digits of account number	4978	\$0.00
	Nonpriority Creditor's Name Attn: Bankruptcy Po Box 965060 Orlando, FL 32896	When was the debt incurred?	Opened 07/11 Last Active 11/23/16	
	Number Street City State Zip Code Who incurred the debt? Check one.	As of the date you file, the claim	is: Check all that apply	
	Debtor 1 only	☐ Contingent		
	■ Debtor 2 only	☐ Unliquidated		
	☐ Debtor 1 and Debtor 2 only	☐ Disputed		
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecure	d claim:	
	☐ Check if this claim is for a community	☐ Student loans		
	debt Is the claim subject to offset?	Obligations arising out of a separeport as priority claims	aration agreement or divorce that you did not	
	■ No	Debts to pension or profit-sharir	ng plans, and other similar debts	
	Yes	Other. Specify Charge Acc	count	
4.4	Synchrony Bank	Last 4 digits of account number	0448	\$0.00
	Nonpriority Creditor's Name	_		
	Attn: Bankruptcy Po Box 965060	When was the debt incurred?	Opened 11/03/13 Last Active 9/07/15	
	Orlando, FL 32896	mon was the assembarrou.	3/01/13	
	Number Street City State Zip Code	As of the date you file, the claim	is: Check all that apply	
	Who incurred the debt? Check one.			
	☐ Debtor 1 only	☐ Contingent		
	Debtor 2 only	☐ Unliquidated		
	Debtor 1 and Debtor 2 only	☐ Disputed		
	\square At least one of the debtors and another	Type of NONPRIORITY unsecure	d claim:	
	☐ Check if this claim is for a community	☐ Student loans		
	debt Is the claim subject to offset?	☐ Obligations arising out of a separeport as priority claims	aration agreement or divorce that you did not	
	■ No	Debts to pension or profit-sharing	g plans, and other similar debts	
	Yes	Other. Specify Charge Acc	count	
4.4	Synchrony Bank/Lowes	Last 4 digits of account number	1348	\$0.00
	Nonpriority Creditor's Name Attn: Bankruptcy Dept Po Box 965060	When was the debt incurred?	Opened 11/11 Last Active 6/17/16	
	Orlando, FL 32896 Number Street City State Zip Code Who incurred the debt? Check one.	As of the date you file, the claim	is: Check all that apply	
	Debtor 1 only	☐ Contingent		
	■ Debtor 2 only	☐ Unliquidated		
	Debtor 1 and Debtor 2 only	☐ Disputed		
	- Depior Fand Depior 2 Only	■ Disputed		

debt

■ No

☐ Yes

☐ At least one of the debtors and another

Is the claim subject to offset?

☐ Check if this claim is for a community

Schedule E/F: Creditors Who Have Unsecured Claims

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☐ Student loans

Type of NONPRIORITY unsecured claim:

■ Other. Specify Charge Account

 $\hfill \Box$ Obligations arising out of a separation agreement or divorce that you did not report as priority claims

 $\hfill\square$ Debts to pension or profit-sharing plans, and other similar debts

		Case number (if known) 19-40519	
Toyota Financial Services	Last 4 digits of account number	0001	
Nonpriority Creditor's Name Attn: Bankruptcy Po Box 8026 Cedar Rapids, IA 52409	When was the debt incurred?	Opened 11/12 Last Active 8/04/14	
Number Street City State Zip Code Who incurred the debt? Check one.	As of the date you file, the claim	s: Check all that apply	
■ Debtor 1 only	☐ Contingent		
☐ Debtor 2 only	☐ Unliquidated		
☐ Debtor 1 and Debtor 2 only	☐ Disputed		
☐ At least one of the debtors and another	Type of NONPRIORITY unsecure	d claim:	
☐ Check if this claim is for a community	☐ Student loans		
debt Is the claim subject to offset?	Obligations arising out of a separeport as priority claims	ration agreement or divorce that you did not	
■ No	Debts to pension or profit-sharing	g plans, and other similar debts	
Yes	Other. Specify Automobile	9	
Toyota Financial Services	Last 4 digits of account number	0001	
Nonpriority Creditor's Name Attn: Bankruptcy Po Box 8026 Cedar Rapids, IA 52409	When was the debt incurred?	Opened 11/10 Last Active 12/05/12	
Number Street City State Zip Code	As of the date you file, the claim	s: Check all that apply	
Who incurred the debt? Check one.			
■ Debtor 1 only	☐ Contingent		
☐ Debtor 2 only	☐ Unliquidated		
☐ Debtor 1 and Debtor 2 only	☐ Disputed		
At least one of the debtors and another	Type of NONPRIORITY unsecure	d claim:	
Check if this claim is for a community	☐ Student loans		
debt Is the claim subject to offset?	Obligations arising out of a separeport as priority claims	ration agreement or divorce that you did not	
■ No	Debts to pension or profit-sharing	g plans, and other similar debts	
Yes	Other. Specify Automobile	3	
Toyota Motor Credit Co	Last 4 digits of account number	R352	Unk
Nonpriority Creditor's Name			
Toyota Financial Services Po Box 8026	When was the debt incurred?	Opened 07/14 Last Active 3/06/17	
Cedar Rapids, IA 52408 Number Street City State Zip Code	As of the date you file, the claim	s. Check all that apply	
Who incurred the debt? Check one.	As of the date you file, the Claim	S. Oneon all that apply	
_	☐ Contingent		
Debtor 1 only			
■ Debtor 1 only □ Debtor 2 only	_		
■ Debtor 1 only □ Debtor 2 only □ Debtor 1 and Debtor 2 only	☐ Unliquidated ☐ Disputed		

debt

■ No ☐ Yes

Schedule E/F: Creditors Who Have Unsecured Claims

■ Other. Specify Lease

☐ Student loans

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☐ Check if this claim is for a community

Is the claim subject to offset?

 $\hfill \Box$ Obligations arising out of a separation agreement or divorce that you did not report as priority claims

 $\hfill\square$ Debts to pension or profit-sharing plans, and other similar debts

er (if known) 19-40519

Transworld System Inc	Last 4 digits of account number	7201	,
Nonpriority Creditor's Name			
Attn: Bankruptcy	When was the debt incurred?	Opened 12/16	
Po Box 15618			
Wilmington, DE 19850	_		
Number Street City State Zip Code	As of the date you file, the claim i	s: Check all that apply	
Who incurred the debt? Check one.			
Debtor 1 only	☐ Contingent		
Debtor 2 only	☐ Unliquidated		
Debtor 1 and Debtor 2 only	☐ Disputed		
☐ At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:	
☐ Check if this claim is for a community	☐ Student loans		
debt	☐ Obligations arising out of a sepa	ration agreement or divorce that you did not	
ls the claim subject to offset?	report as priority claims		
■ No	Debts to pension or profit-sharing	g plans, and other similar debts	
□Yes	■ Other. Specify Collection	Attorney Auto Club Group	

Part 3: List Others to Be Notified About a Debt That You Already Listed

Part 4: Add the Amounts for Each Type of Unsecured Claim

6. Total the amounts of certain types of unsecured claims. This information is for statistical reporting purposes only. 28 U.S.C. §159. Add the amounts for each type of unsecured claim.

				7	Total Claim
	6a.	Domestic support obligations	6a.	\$	0.00
Total claims					
from Part 1	6b.	Taxes and certain other debts you owe the government	6b.	\$	0.00
	6c.	Claims for death or personal injury while you were intoxicated	6c.	\$	0.00
	6d.	Other. Add all other priority unsecured claims. Write that amount here.	6d.	\$	0.00
	6e.	Total Priority. Add lines 6a through 6d.	6e.	\$	0.00
					Catal Olaim
	6f.	Student loans	6f.	\$	otal Claim 3,910.00
Total	0		· · ·	Ψ	3,310.00
claims from Part 2	6a.	Obligations arising out of a separation agreement or divorce that			
HOIH Fait 2	og.	you did not report as priority claims	6g.	\$	0.00
	6h.	Debts to pension or profit-sharing plans, and other similar debts	6h.	\$	0.00
	6i.	Other. Add all other nonpriority unsecured claims. Write that amount here.	6i.	\$	55,912.45
	6j.	Total Nonpriority. Add lines 6f through 6i.	6j.	\$	59,822.45

^{5.} Use this page only if you have others to be notified about your bankruptcy, for a debt that you already listed in Parts 1 or 2. For example, if a collection agency is trying to collect from you for a debt you owe to someone else, list the original creditor in Parts 1 or 2, then list the collection agency here. Similarly, if you have more than one creditor for any of the debts that you listed in Parts 1 or 2, list the additional creditors here. If you do not have additional persons to be notified for any debts in Parts 1 or 2, do not fill out or submit this page.

Fill in this inform	nation to identify your	case:		
Debtor 1	Kenneth Markhan	n		
	First Name	Middle Name	Last Name	
Debtor 2	Amanda Markhan	1		
(Spouse if, filing)	First Name	Middle Name	Last Name	
United States Bar	nkruptcy Court for the:	EASTERN DISTRICT C	DF MICHIGAN	
Case number 1	19-40519			
(if known)				Check if this is an amended filing

Official Form 106G

Schedule G: Executory Contracts and Unexpired Leases

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, copy the additional page, fill it out, number the entries, and attach it to this page. On the top of any additional pages, write your name and case number (if known).

- 1. Do you have any executory contracts or unexpired leases?
 - No. Check this box and file this form with the court with your other schedules. You have nothing else to report on this form.
 - ☐ Yes. Fill in all of the information below even if the contacts of leases are listed on Schedule A/B:Property (Official Form 106 A/B).
- List separately each person or company with whom you have the contract or lease. Then state what each contract or lease is for (for example, rent, vehicle lease, cell phone). See the instructions for this form in the instruction booklet for more examples of executory contracts and unexpired leases.

	rerson or	Name, Number	wnom you nave tn , Street, City, State and ZIF	e contract or lease	State what the contract or lease is for
.1					
	Name				
	Number	Street			<u> </u>
	City		State	ZIP Code	_
2.2					
	Name				
	Number	Street			<u> </u>
	City		State	ZIP Code	_
2.3					
	Name				
	Number	Street			<u> </u>
	City		State	ZIP Code	_
2.4					
	Name				
	Number	Street			
	City		State	ZIP Code	<u> </u>
2.5					
	Name				_
	Number	Street			_
	City		State	ZIP Code	_

Fill in this in	nformation to identify you	r case:			
Debtor 1	Kenneth Markha	ım			
D 1 0	First Name	Middle Name	Last Name		
Debtor 2 (Spouse if, filing	Amanda Markha First Name	Middle Name	Last Name		
United State	es Bankruptcy Court for the:	EASTERN DISTRICT	OF MICHIGAN		
Case number	er 19-40519				
(if known)	19-40319				☐ Check if this is an amended filing
Official	Form 106H				
	ıle H: Your Co	lobtors			40/45
Scheat	ile n. Tour Cod	ienioi 2			12/15
fill it out, and your name a		e boxes on the left. Attac n). Answer every question	h the Additional Page t n.	o this page. On the top o	eded, copy the Additional Page, of any Additional Pages, write
1. DO y	ou have any codebiors: (i you are ming a joint case,	, do not list citrior spouse	as a couchtor.	
■ No □ Yes					
	n the last 8 years, have yo				states and territories include
	Go to line 3. Did your spouse, former spo	ouse, or legal equivalent liv	ve with you at the time?		
in line 2	2 again as a codebtor only 06D), Schedule E/F (Officia	if that person is a guara	ntor or cosigner. Make	sure you have listed the	with you. List the person shown creditor on Schedule D (Official chedule E/F, or Schedule G to fill
	olumn 1: Your codebtor ame, Number, Street, City, State and	ZIP Code		Column 2: The credi	tor to whom you owe the debt that apply:
3.1				☐ Schedule D. line	
	ame			☐ Schedule E/F, line	 e
				☐ Schedule G, line	
	umber Street			_	
Ci	ity	State	ZIP Code		
3.2				☐ Schedule D, line	
	ame			_ ☐ Schedule E/F, line	
				☐ Schedule G, line	
N	umber Street			_	
Ci	ity	State	ZIP Code		

Fill in this information	to identify your case:	
Debtor 1	Kenneth Markham	
Debtor 2 (Spouse, if filing)	Amanda Markham	
United States Bankru	ptcy Court for the: EASTERN DISTRICT OF MICHIGAN	
Case number 19	-40519	Check if this is:
(If known)		☐ An amended filing
		A supplement showing postpetition chapter 13 income as of the following date:
Official Form	<u>106l</u>	MM / DD/ YYYY
Schedule I:	Your Income	12/15
supplying correct inf spouse. If you are se	accurate as possible. If two married people are filing together (Deb ormation. If you are married and not filing jointly, and your spouse parated and your spouse is not filing with you, do not include info eet to this form. On the top of any additional pages, write your nam	e is living with you, include information about your ration about your spouse. If more space is needed,

Describe Employment 1. Fill in your employment Debtor 1 Debtor 2 or non-filing spouse information. ☐ Employed ■ Employed If you have more than one job, **Employment status** attach a separate page with ■ Not employed Not employed information about additional employers. Occupation **SAC Instructor** Include part-time, seasonal, or Employer's name **Livonia Public Schools** self-employed work. Occupation may include student **Employer's address** 15125 Farmington Rd. or homemaker, if it applies. Livonia, MI 48154 How long employed there? 2 months

Give Details About Monthly Income

Estimate monthly income as of the date you file this form. If you have nothing to report for any line, write \$0 in the space. Include your non-filing spouse unless you are separated.

If you or your non-filing spouse have more than one employer, combine the information for all employers for that person on the lines below. If you need more space, attach a separate sheet to this form.

List monthly gross wages, salary, and commissions (before all payroll

- 2. deductions). If not paid monthly, calculate what the monthly wage would be.
- 3. Estimate and list monthly overtime pay.
- 4. Calculate gross Income. Add line 2 + line 3.

	non-fil	ing spouse
2. \$ 1,607	'.67 \$	0.00
3. +\$0).00 <u>+</u> \$	0.00
4. \$ 1,607.6	7 \$_	0.00

Case number (if known)

19-40519

				For I	Debtor 1		Debtor 2 or -filing spouse
(Сору	line 4 here	4.	\$	1,607.67	\$	0.00
5. L	.ist a	III payroll deductions:					
5	ia.	Tax, Medicare, and Social Security deductions	5a.	\$	155.65	\$	0.00
5	b.	Mandatory contributions for retirement plans	5b.	\$	99.67	\$	0.00
5	ic.	Voluntary contributions for retirement plans	5c.	\$	0.00	\$	0.00
5	id.	Required repayments of retirement fund loans	5d.	\$	0.00	\$	0.00
5	ie.	Insurance	5e.	\$	64.31	\$	0.00
	of.	Domestic support obligations	5f.	\$	0.00	\$	0.00
	g.	Union dues	5g.	\$	0.00	\$	0.00
5	ih.	Other deductions. Specify:	_ 5h.+	\$	0.00	+ \$	0.00
6. <i>A</i>	Add t	the payroll deductions. Add lines 5a+5b+5c+5d+5e+5f+5g+5h.	6.	\$	319.63	\$	0.00
7. (Calcu	ulate total monthly take-home pay. Subtract line 6 from line 4.	7.	\$	1,288.04	\$	0.00
	ist a a.	Net income regularly received: Net income from rental property and from operating a business, profession, or farm Attach a statement for each property and business showing gross receipts, ordinary and necessary business expenses, and the total monthly net income.	8a.	\$	0.00	\$	0.00
8	ßb.	Interest and dividends	8b.	\$	0.00	\$	0.00
	Bc.	Family support payments that you, a non-filing spouse, or a dependent regularly receive Include alimony, spousal support, child support, maintenance, divorce settlement, and property settlement.	8c.	\$	0.00	\$	0.00
8	ßd.	Unemployment compensation	8d.	\$	0.00	\$	0.00
8	ße.	Social Security	8e.	\$	0.00	\$	0.00
8	ßf.	Other government assistance that you regularly receive Include cash assistance and the value (if known) of any non-cash assistance that you receive, such as food stamps (benefits under the Supplemental Nutrition Assistance Program) or housing subsidies. Specify:	8f.	\$	0.00	\$	0.00
8	ßg.	Pension or retirement income	8g.	\$	0.00	\$	0.00
8	ßh.	Other monthly income. Specify:	_ 8h.+	\$	0.00	+ \$	0.00
9. <i>A</i>	Add a	all other income. Add lines 8a+8b+8c+8d+8e+8f+8g+8h.	9.	\$	0.00	\$	0.00
10. (Calcu	ulate monthly income. Add line 7 + line 9.	10. \$	1	,288.04 + \$		0.00 = \$ 1,288.04
A	Add th	he entries in line 10 for Debtor 1 and Debtor 2 or non-filing spouse.			<u> </u>		
 	nclud other	all other regular contributions to the expenses that you list in Schedule and contributions from an unmarried partner, members of your household, your of friends or relatives. In include any amounts already included in lines 2-10 or amounts that are not a few.	depen		•		Schedule J. 11. +\$ 0.00
٧		the amount in the last column of line 10 to the amount in line 11. The result that amount on the Summary of Schedules and Statistical Summary of Certaines					12. \$1,288.04
13. [Do yo	ou expect an increase or decrease within the year after you file this form?	,				Combined monthly income
ı		No.					
-	-	Yes. Explain:					-

Fill i	n this infor <u>m</u>	ation to identify yo	our case:					
Debt	or 1	Kenneth Ma	rkham			Check	c if this is:	
							An amended filing	
Debt		Amanda Mai	kham					wing postpetition chapter the following date:
(Spo	use, if filing)					'	is expenses as or	the following date.
Unite	ed States Banl	kruptcy Court for the	: EASTE	RN DISTRICT OF MICHIG	GAN	<u></u>	MM / DD / YYYY	
	e number 1	9-40519						
Of	ficial F	orm 106J						
Sc	hedule	e J: Your	Exper	nses				12/1
Be a	as complete rmation. If r	and accurate as	possible eded, atta	. If two married people ar ich another sheet to this				
Part		ribe Your House	hold					
1.	Is this a jo							
	□ No. Go							
		es Debtor 2 live	in a separ	ate household?				
	■ !		st file Offici	al Form 106J-2, <i>Expenses</i>	for Separate Housel	nold of Debto	or 2.	
2.	Do you ha	ve dependents?	■ No					
	Do not list I	Debtor 1 and	☐ Yes.	Fill out this information for	Dependent's relation		Dependent's	Does dependent
	Debtor 2.			each dependent	Debtor 1 or Debtor	2	age	live with you?
	Do not state dependents							□ No
	dependent	s names.			-			☐ Yes ☐ No
								☐ Yes
								□ No
								☐ Yes
								□ No
2	Da				-		-	☐ Yes
3.		openses include of people other t	han	No				
		nd your depende		Yes				
Part	2: Estir	nate Your Ongoi	na Month	ly Fynenses				
Esti expe	mate your e	expenses as of you	our bankr	uptcy filing date unless y y is filed. If this is a supp				
				government assistance i				
(Offi	icial Form 1	061.)					Your exp	enses
4.		or home owners		ses for your residence. In	nclude first mortgage	4. \$		0.00
	If not inclu	ided in line 4:						
	4a Bool	actate taves				40 °		0.00
		estate taxes erty, homeowner's	s. or renter	's insurance		4a. \$ 4b. \$		0.00 0.00
		e maintenance, re				4c. \$		0.00
	4d. Hom	eowner's associat	ion or con	dominium dues		4d. \$		0.00
5.	Additional	mortgage payme	ents for yo	our residence, such as ho	me equity loans	5. \$		0.00

Utilities: Sa. Electricity, heat, natural gas Sa. Electricity, solicity, solicy Sa. Sa. Sa. Sa. Sa. Sa. Sa. O.	Deb	otor 1	Kenneth	n Markham			
6a. Electricity, heat, natural gas 6b. Water, sewer, garbage collection 6c. Telephone, cell phone, Internet, satellite, and cable services 6c. \$ 180.00 6c. Telephone, cell phone, Internet, satellite, and cable services 6c. \$ 180.00 7. Food and housekeeping supplies 7. \$ 500.00 8. Childcare and children's education costs 8. \$ 0.00 9. Clothing, laundry, and dry cleaning 9. \$ 40.00 10. Personal care products and services 10. \$ 40.00 11. Personal care products and services 11. \$ 0.00 12. Transportation, include gas, maintenance, bus or train fare. 12. \$ 200.00 13. Transportation, include gas, maintenance, bus or train fare. 14. \$ 0.00 15. Insurance. 15. Do not include car payments. 16. Chaltrable contributions and religious donations 17. Insurance. 18. Electricity heat gas and training t	Deb	otor 2	Amanda	Markham	Case num	ber (if known)	19-40519
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☐ Yes. Explain here:		■ N	0.				
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Fill in this information to identify your case:								
Debtor 1	Kenneth Markhar	n						
	First Name	Middle Name	Last Name					
Debtor 2	Amanda Markhan	n						
(Spouse if, filing)	First Name	Middle Name	Last Name					
United States Bar	nkruptcy Court for the:	EASTERN DISTRICT C	F MICHIGAN					
Case number	19-40519							
(if known)	10 40010				_	Check if this is an amended filing		

Official Form 106Dec

Declaration About an Individual Debtor's Schedules

12/15

If two married people are filing together, both are equally responsible for supplying correct information.

You must file this form whenever you file bankruptcy schedules or amended schedules. Making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.

Sign Below	
Did you pay or agree to pay someone who is NOT an attorney to	help you fill out bankruptcy forms?
■ No	
☐ Yes. Name of person	Attach Bankruptcy Petition Preparer's Notice, Declaration, and Signature (Official Form 119)
Under penalty of perjury, I declare that I have read the summary at that they are true and correct. X /s/ Kenneth Markham Kenneth Markham Signature of Debtor 1 Date January 25, 2019	X /s/ Amanda Markham Amanda Markham Signature of Debtor 2

Official Form 106Dec

Declaration About an Individual Debtor's Schedules

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Best Case Bankruptcy

		mation to identify you					
Debto	r 1	Kenneth Markha	Middle Name		Last Name		
Debto	r 2	Amanda Markha			Lastivanie		
	e if, filing)	First Name	Middle Name		Last Name		
United	d States Ba	ankruptcy Court for the:	EASTERN DISTRICT O	F MIC	HIGAN		
Case	number	19-40519					
(if know	_					_	heck if this is an
						a	mended filing
		orm 107				_	
Stat	ement	of Financial	Affairs for Indivi	dua	als Filing for B	ankruptcy	4/16
inform	ation. If n		attach a separate sheet to			equally responsible for sup additional pages, write you	
Part 1	Give I	Details About Your Ma	arital Status and Where Yo	u Live	ed Before		
1. W	/hat is you	ır current marital statı	ıs?				
_							
-	MarriedNot ma	-					
_	ı Notilla	ineu					
2. D	uring the	last 3 years, have you	lived anywhere other than	ı wher	re you live now?		
] No						
	Yes. Li	st all of the places you l	ived in the last 3 years. Do r	not inc	clude where you live now.		
	Debtor 1 P	rior Address:	Dates Debtor 1	1	Debtor 2 Prior Add	dress:	Dates Debtor 2
			lived there				lived there
	36845 Sib	oley Rd. con, MI 48164	From-To: 8/2011 - 7/20 °	18	Same as Debtor 1		Same as Debtor 1
	16M DOS	.OII, WII 40104	0/2011 1/20				From-To:
Part 2	No Yes. M Expla id you hav	ries include Arizona, Ca ake sure you fill out Scl in the Sources of You we any income from en	lifornia, Idaho, Louisiana, Nonedule H: Your Codebtors (Cor Income	evada Official	, New Mexico, Puerto Rid Form 106H).	ty property state or territory co, Texas, Washington and W	/isconsin.)
	you are fili		u received from all jobs and have income that you recei				
_	l No ■ v =						
	Yes. Fi	ll in the details.					
			Debtor 1			Debtor 2	
			Sources of income Check all that apply.	(b	ross income before deductions and ecclusions)	Sources of income Check all that apply.	Gross income (before deductions and exclusions)

Statement of Financial Affairs for Individuals Filing for Bankruptcy

				Debtor 1					Debt	or 2			
				Sources of Check all	of income that apply.	(be	oss income fore deducti clusions)	ons and		ces of ind k all that a		Gross inc (before de and exclu	eductions
	For last calendar year: (January 1 to December 31, 2018)		31, 2018)	☐ Wages bonuses,	/ages, commissions, so.00 sees, tips			ages, con ses, tips	nmissions,	\$	3,125.50		
				☐ Operat	ing a business					perating a	business		
		dar year bef December 3		☐ Wages bonuses,	, commissions, ips			\$0.00		ages, con ses, tips	nmissions,	\$1	3,759.31
				☐ Operat	ing a business				О	perating a	business		
 	Include in and other winnings. List each	come regard public benefi If you are filir	ess of whethe t payments; p ng a joint case ne gross incon	r that incorensions; reand you h	s year or the two me is taxable. Ex ental income; inte ave income that ch source separa	amples rest; di you red	s of <i>other ind</i> ividends; mo ceived togetl	come are a ney colled ner, list it d	alimony; cted from only onc	lawsuits under D	royalties; a ebtor 1.	Security, uner Ind gambling a	mployment, and lottery
				Debtor 1					Debt	or 2			
				Sources of Describe b		eac (be	oss income ch source efore deducti clusions)		Sour	ces of inc		Gross inc (before de and exclu	eductions
Part	3: Lis	t Certain Pay	ments You N	lade Befo	re You Filed for	Bankr	uptcy						
	□ No.	Neither De individual puring the No. Yes	btor 1 nor De rimarily for a properties of the line 7. List below ear paid that creen not include properties of the properties of the line 7. List below ear paid that creen out include properties of the line 7. List below ear paid that creen not include properties of the line 7.	btor 2 has bersonal, fa e you filed ach creditor ditor. Do no ayments to on 4/01/19 both have	marily consumes primarily consumes primarily consumity, or househor for bankruptcy, do not include payment and every 3 years or bankruptcy, do not bankruptcy, do not to whom you part to whom you part to whom you part to whom you part to see the primarily consumity c	umer of bld purp id you id a tot nts for this bar rs after umer of id you	debts. Cons pose." pay any cred tal of \$6,425 domestic su nkruptcy cas that for case debts. pay any cred	ditor a tota * or more pport oblige e. es filed on ditor a tota	in one ogations, or after	25* or more pasuch as clothed date of the date of the control or more	yments and nild support of adjustmer	the total amo and alimony. nt.	unt you Also, do
		— 163		ents for do	omestic support c								
	Creditor	's Name and	Address		Dates of payme	ent	Total a	mount paid		unt you till owe	Was this	payment for	·

Statement of Financial Affairs for Individuals Filing for Bankruptcy

	otor 1 otor 2	Kenneth Markham Amanda Markham		Cas	e number (if known)	19-40519		
7.	Inside of whi	n 1 year before you filed for bankruptoers include your relatives; any general paich you are an officer, director, person in iness you operate as a sole proprietor. 1 ny.	rtners; relatives of any gen control, or owner of 20% o	eral partners; partners of their voting	erships of which you g securities; and ar	u are a general pa ny managing ager	nt, including one fo	
		No Yes. List all payments to an insider.						
		der's Name and Address	Dates of payment	Total amount paid	Amount you still owe	Reason for this	s payment	
3.	inside Includ	de payments on debts guaranteed or cos		•		count of a debt	that benefited ar	
		No Yes. List all payments to an insider						
		der's Name and Address	Dates of payment	Total amount paid	Amount you still owe	Reason for this		
				pulu	Sim Owe	moldae orealter	o name	
Par	t 4:	Identify Legal Actions, Repossession	is, and Foreclosures					
9.	List al modifi	 n 1 year before you filed for bankrupto Il such matters, including personal injury ications, and contract disputes. No Yes, Fill in the details. 						
		e title	Nature of the case	Court or agency		Status of the c	ase	
		e number						
	One	neth R. Markham v. Capital Bank, N.A. 253GC	Civil	34TH DISTRICT COURT 11131 S. WAYNE RD. Romulus, MI 48174		☐ Pending ☐ On appeal ■ Concluded		
10.	Check	n 1 year before you filed for bankrupto k all that apply and fill in the details below No. Go to line 11. Yes. Fill in the information below.		erty repossessed, f	oreclosed, garnis	hed, attached, so	eized, or levied?	
	Cred	litor Name and Address	Describe the Property		Date		Value of the	
			Explain what happened	i			property	
11.	accol	n 90 days before you filed for bankrup unts or refuse to make a payment beca No		luding a bank or fir	nancial institution	, set off any amo	ounts from your	
	_	Yes. Fill in the details. editor Name and Address Describe the action the creditor too			Date a	action was	Amount	
12.		n 1 year before you filed for bankrupto -appointed receiver, a custodian, or a		erty in the possess	ion of an assigned	e for the benefit	of creditors, a	
	_	No						
	_	Yes						

Statement of Financial Affairs for Individuals Filing for Bankruptcy

	otor 1 Kenneth Markham Otor 2 Amanda Markham			Case number (if known	19-40519			
Par	t 5: List Certain Gifts and Contribution	ons						
13.	Within 2 years before you filed for bankruptcy, did you give any gifts with a total value of more than \$600 per person? ■ No							
	Yes. Fill in the details for each gift.							
	Gifts with a total value of more than \$600 per person		Describe the gifts		es you gave gifts	Value		
	Person to Whom You Gave the Gift an Address:	ıd						
14.	Within 2 years before you filed for bankruptcy, did you give any gifts or contributions with a total value of more than \$600 to any charity? ■ No							
	Yes. Fill in the details for each gift or			D-1		Value		
	Gifts or contributions to charities that more than \$600 Charity's Name Address (Number, Street, City, State and ZIP Co.		Describe what you contributed		es you tributed	Value		
Par	t 6: List Certain Losses							
15.	Within 1 year before you filed for bankruptcy or since you filed for bankruptcy, did you lose anything because of theft, fire, other disaster or gambling? No							
	Yes. Fill in the details.			.				
	Describe the property you lost and how the loss occurred		be any insurance coverage for the l	loss	e of your	Value of property lost		
			the amount that insurance has paid. I ce claims on line 33 of Schedule A/B:	_ist penaing		1001		
	t 7: List Certain Payments or Transfe							
	Within 1 year before you filed for bankr consulted about seeking bankruptcy or Include any attorneys, bankruptcy petition No Yes. Fill in the details.	ruptcy, dic r preparin	g a bankruptcy petition?			rty to anyone you		
	Person Who Was Paid		Description and value of any prop	•	payment	Amount of		
	Address Email or website address Person Who Made the Payment, if Not	You	transferred		ansfer was le	payment		
17.	 Within 1 year before you filed for bankruptcy, did you or anyone else acting on your behalf pay or transfer any property to anyone who promised to help you deal with your creditors or to make payments to your creditors? Do not include any payment or transfer that you listed on line 16. No Yes. Fill in the details. 							
	Person Who Was Paid		Description and value of any prop	nerty Date	payment	Amount of		
	Address		transferred		ansfer was	payment		
18.	Within 2 years before you filed for bankruptcy, did you sell, trade, or otherwise transfer any property to anyone, other than property transferred in the ordinary course of your business or financial affairs? Include both outright transfers and transfers made as security (such as the granting of a security interest or mortgage on your property). Do not include gifts and transfers that you have already listed on this statement. No Yes. Fill in the details.							
	Person Who Received Transfer Address		Description and value of property transferred	Describe any propayments received	ed or debts	Date transfer was made		
	Person's relationship to you			para in exercising	-			

Statement of Financial Affairs for Individuals Filing for Bankruptcy

19.	Within 10 years before you filed for bankruptcy beneficiary? (These are often called asset-protect No		y property to a	a self-settle	d trust or similar device o	of which you are a		
	Yes. Fill in the details. Name of trust	Description and va	alue of the pro	perty trans	ferred	Date Transfer was		
						made		
Par	t 8: List of Certain Financial Accounts, Instru	ıments, Safe Deposit	Boxes, and S	torage Unit	S			
	Within 1 year before you filed for bankruptcy, v sold, moved, or transferred? Include checking, savings, money market, or o houses, pension funds, cooperatives, associated No	ther financial accoun	nts; certificates	s of deposit				
	Name of Financial Institution and La	Last 4 digits of Type of account number instrument		ount or	Date account was closed, sold, moved, or transferred	Last balance before closing or transfer		
21.	Do you now have, or did you have within 1 year before you filed for bankruptcy, any safe deposit box or other depository for securities, cash, or other valuables?							
	■ No □ Yes. Fill in the details.							
	Name of Financial Institution Address (Number, Street, City, State and ZIP Code)	Who else had according Address (Number, State and ZIP Code)			the contents	Do you still have it?		
22.	Have you stored property in a storage unit or place other than your home within 1 year before you filed for bankruptcy?							
	■ No □ Yes. Fill in the details.							
	Name of Storage Facility Address (Number, Street, City, State and ZIP Code)	Who else has or h to it? Address (Number, St State and ZIP Code)		Describe	the contents	Do you still have it?		
Par	t 9: Identify Property You Hold or Control for	Someone Else						
23.	Do you hold or control any property that someone else owns? Include any property you borrowed from, are storing for, or hold in trust for someone.							
	NoYes. Fill in the details.							
	Owner's Name Address (Number, Street, City, State and ZIP Code)	Where is the prop (Number, Street, City, St Code)		Describe	the property	Value		
Par	t 10: Give Details About Environmental Inform	nation						
For t	the purpose of Part 10, the following definitions	apply:						
	Environmental law means any federal, state, or local statute or regulation concerning pollution, contamination, releases of hazardous or toxic substances, wastes, or material into the air, land, soil, surface water, groundwater, or other medium, including statutes or regulations controlling the cleanup of these substances, wastes, or material.							
	Site means any location, facility, or property as defined under any environmental law, whether you now own, operate, or utilize it or used to own, operate, or utilize it, including disposal sites.							
Hazardous material means anything an environmental law defines as a hazardous waste, hazardous substance, toxic substance hazardous material, pollutant, contaminant, or similar term.						substance,		

Report all notices, releases, and proceedings that you know about, regardless of when they occurred.

Statement of Financial Affairs for Individuals Filing for Bankruptcy

24.	Has any governmental unit notified you that you may be liable or potentially liable under or in violation of an environmental law?							
	■ No □ Yes. Fill in the details.							
		me of site dress (Number, Street, City, State and ZIP Code)	Governmental unit Address (Number, Street, City, State : ZIP Code)	and	Environmental law, if you know it	Date of notice		
25.	Hav	e you notified any governmental unit of	any release of hazardous material?					
		No Yes. Fill in the details.						
		me of site dress (Number, Street, City, State and ZIP Code)	Governmental unit Address (Number, Street, City, State : ZIP Code)	and	Environmental law, if you know it	Date of notice		
26.	Hav	Have you been a party in any judicial or administrative proceeding under any environmental law? Include settlements and orders.						
	■ No □ Yes. Fill in the details.							
		se Title se Number	Court or agency Name Address (Number, Street, City, State and ZIP Code)	Na	ature of the case	Status of the case		
Par	t 11:	Give Details About Your Business or 0	Connections to Any Business					
27.	Witl	nin 4 years before you filed for bankrupto	cy, did you own a business or have a	any o	f the following connections to any	business?		
	☐ A sole proprietor or self-employed in a trade, profession, or other activity, either full-time or part-time							
	☐ A member of a limited liability company (LLC) or limited liability partnership (LLP)							
	☐ A partner in a partnership							
	☐ An officer, director, or managing executive of a corporation							
	☐ An owner of at least 5% of the voting or equity securities of a corporation							
	No. None of the above applies. Go to Part 12.							
	Yes. Check all that apply above and fill in the details below for each business.							
		siness Name dress	Describe the nature of the business	S	Employer Identification number Do not include Social Security n	umber or ITIN		
		mber, Street, City, State and ZIP Code)	Name of accountant or bookkeeper	7	Dates business existed	umber of Triiv.		
28.	Within 2 years before you filed for bankruptcy, did you give a financial statement to anyone about your business? Include all financial institutions, creditors, or other parties.							
		No Yes. Fill in the details below.						
		me dress mber, Street, City, State and ZIP Code)	Date Issued					

Debtor 1 Debtor 2	Kenneth Markham Amanda Markham			Case number (if known)	19-40519	
Part 12:	Sign Below					
are true ar	d the answers on this <i>Statement of Fina</i> nd correct. I understand that making a fakruptcy case can result in fines up to \$2 §§ 152, 1341, 1519, and 3571.	alse statement,	, concealing property	, or obtaining money or		
/s/ Kenneth Markham /s/ Amanda Ma			nanda Markham			
Kenneth	Markham	Amanda Markham				
Signature	e of Debtor 1	Signat	ture of Debtor 2			
Date Ja	nuary 25, 2019	Date	January 25, 2019			
Did you at	tach additional pages to Your Statemen	nt of Financial A	Affairs for Individuals	Filing for Bankruptcy (Official Form 107)?	
■ No					·	
☐ Yes						

Did you pay or agree to pay someone who is not an attorney to help you fill out bankruptcy forms?

☐ Yes. Name of Person _____. Attach the Bankruptcy Petition Preparer's Notice, Declaration, and Signature (Official Form 119).

Official Form 107

■ No